Entered 06/14/18 79:27:18, Case 18-16992 Doc 1 Filed 06/14/18 Page 1 of 57 UNITED STATES BANKRUPTCY COURT Document Fill in this information to identify your case: NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: JUN 14 2018 Northern District of Illinois JEFFREY P. ALLSTEADT, CLERK Case number (If known): Chapter you are filing under: INTAKE 1 Chapter 7 Chapter 11 Chapter 12 Chapter 13 Check if this is an amended filing Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy 12/15 The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number

| 1. Your full name | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case) |
|--|---------------------------------|--|
| Write the name that is on your government-issued picture | Ayanna | |
| identification (for example, your driver's license or passport). | First name NICOLC Middle name | First name |
| Bring your picture identification to your meeting | Last name | Middle name |
| with the trustee. | Suffix (Sr., Jr., II, III) | Last name Suffix (Sr., Jr., II, III) |
| | | |
| All other names you have used in the last 8 years | First name | First name |
| Include your married or maiden names | Middle name | Middle name |
| | Last name | Last name |
| | First name | First name |
| | Middle name | Middle name |
| Ī | ast name | Last name |
| | | |
| Dillock and Carles at 1 | x -x-5994 | xxx - xx |
| Individual Taxpaver | xx - xx | OR |

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| sed any business names | or EINs. | About Debtor 2 (Spouse Only In a Joint Cas I have not used any business names or EIN Business name |
|--|--|--|
| | or EINs. | I have not used any business names or EIN |
| ed any business names | or EINs. | I have not used any business names or EIN |
| sed any business names | s or EINs. | Business name |
| eed any business names | or EINs. | Business name |
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| | | |
| | | EIN |
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| | | EIN |
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| | | |
| | | If Debtor 2 lives at a different address: |
| 5. Kenwa | on a son | |
| <u> </u> | M LENK | Number Street |
| 12 | | Gueet . |
| <u> </u> | | |
| \ T1 | (000 15 | |
| State | ZIP Code | 04 |
| · · | ZIF Code | City State ZIP Co |
| | | County |
| J | | · |
| fress is different from to. Note that the court will | ihe one | If Debtor 2's mailing address is different from |
| at this mailing address. | , 00110 | yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | duress. |
| ···· | ······································ | |
| | | Number Street |
| | | |
| | | P.O. Box |
| State Z | ZIP Code | City |
| | J. 0006 | State ZIP Cod |
| | | |
| | | Check one: |
| days before filing this pe | etition, | Over the last 180 days before filing this petition, |
| days belore filing this pe district longer than in ar | ny | |
| ISON Evalain | | orior district. |
| 1408.) | | I have another reason. Explain. |
| | | (See 28 U.S.C. § 1408.) |
| | | |
| | N | |
| | | |
| a | ason. Explain. 1408.) | ason Evalain |

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Debtor 1

| . 1 | | | ~ | 2 00a. |
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| | na | N | Icole | Lee, |
| First Name | Middle | Name | | |
| | | | 1.48 | t Name |

Case number (if known)____

| 7. The chapter of the Bankruptcy Code you | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. |
|---|---|
| are choosing to file under | Chapter 7 |
| | ☐ Chapter 11 |
| | ☐ Chapter 12 |
| | ☐ Chapter 13 |
| 8. How you will pay the fee | will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7 By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. |
| Have you filed for bankruptcy within the last 8 years? | No Yes. District |
| Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | No Yes. Debtor Relationship to you District When Case number, if known |
| | Debtor Relationship to you District When Case number, if known |
| | No. Go to line 12. Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? No. Go to line 12. |

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Ayanna Nicole Lee

First Name Middle Name Last Name

Case number (if known)_

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Debtor 1

Document

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

received a briefing from an approved credit counseling agency within the 180 days before i filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after i reasonably tried to do so.

☐ Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so. ☐ Active duty. I am currently on active military

duty in a military combat zone. If you believe you are not required to receive a

briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1

Ayanna Nicole Lee

Case number (if known)_

| Part 6: Answer These Qu | uestions for Reporting Pu | rposes | |
|--|--|---|--|
| 16. What kind of debts do you have? | No. Go to line 16b Yes. Go to line 17. 16b. Are your debts pri money for a business | marily business debts? Business debt or investment or through the operation of th | susenoid purpose." |
| | No. Go to line 16c. Yes. Go to line 17. | | |
| mattill, delakaning sign delemente a sitt ja transport (California Martin Chelles Chelles (Chelles Chelles (A | 16c. State the type of debts State ta | you owe that are not consumer debts or bu | usiness debts. |
| 17. Are you filing under Chapter 7? | ☐ No. I am not filing unde | r Chapter 7. Go to line 18. | CONTROL NATION CONTROL |
| Do you estimate that afte any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | Yes. I am filing under Ch administrative expe | apter 7. Do you estimate that after any exe nses are paid that funds will be available to | mpt property is excluded and describute to unsecured creditors? |
| 18. How many creditors do you estimate that you owe? | 1-49 50-99 100-199 200-999 | ☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000 | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. How much do you estimate your liabilities to be? Part 76 Sign Below | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| | have examined this netition | and I dodoro under very | |
| For you | If I have chosen to file under C of title 11, United States Code under Chapter 7. If no attorney represents me as | and I declare under penalty of perjury that the chapter 7, I am aware that I may proceed, if I understand the relief available under each I did not pay or agree to pay someone will and read the notice required by 11 LLCC. | eligible, under Chapter 7, 11,12, or 13 th chapter, and I choose to proceed |
| | I request relief in accordance v | with the chapter of title 11, United States Co atement, concealing property, or obtaining r | § 342(b). de, specified in this petition. |
| | Signature of Debtor 1 Executed or OG //4/ MM / DD // | | on |

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Debtor 1

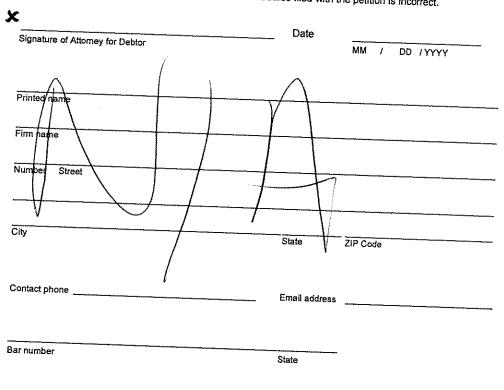
| | | Booanno |
|---------------------|---------------|---------|
| | Nicore | Lee |
| First Name Middle I | Name Last Nam | |

Case number (if known)____

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.



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Debtor 1

Ayanna Nicole Lee

Case number (if known)_

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

| *** | | |
|--|--|---|
| Are you aware that filing for bankruptcy is a serious a consequences? | action with long | -term financial and legal |
| □ No | | |
| A Yes | | |
| | | |
| Are you aware that bankruptcy fraud is a serious criminaccurate or incomplete, you could be fined or impris | ne and that if yo | ur bankruptcy forms are |
| No No | soned? | |
| Yes | | |
| Did you pay or agree to pay assess | | |
| Did you pay or agree to pay someone who is not an a | ttorney to help | you fill out your bankruptcy forms? |
| Yes. Name of Person | | |
| Attach Bankruptcy Petition Preparers Notice D | | |
| Attach Bankruptcy Petition Preparer's Notice, De | ciaration, and S | ignature (Official Form 119). |
| By signing here, I acknowledge that I understand the read and understood this notice, and I am aware attorney may cause me to lose my rights or property if Signature of Debtor 1 Date | isks involved in that filing a bar I do not properl Signature of De | nkruptcy case without an y handle the case. |
| MMI/ DD I / YYYY | Date | MM / DD / YYYY |
| Contact phone 713-435-7408 | Contact phone | |
| Cell phone 773-425-7403 | Cell phone | |
| Email address ayanna 1886ma (2000 | Cell priorie | |
| Lindi addiess Comment () () () () () () () () () (| e | : |
| S COTT | Email address | |

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Debtor 1

Ayanna NICOTE LEE

| SINE | |
|--|--|
| Sir Finance Corp 4247 West 3157 Street 12 Chicago IIL 60616: | |
| First-Mark Services Collection Agency Clo IDAPF P.O. Box 82522 Lincoln INE 68501-2522 | |
| Keynote Consulting Original Creditor: Manus Dental 200 West Campus D'Hyde Park Ste 102 Arlington Heights, IL 60004 | |
| TDapp 1755 Lake Cook Road Deerfield, IL 60015-5269 | |
| Great Lakes (U.S. Department of PO BOX 7860 Education) Madison, WI 53707-7860 | |
| Constar Financial Services H 10400 N 25th Avenue Stute 100 Phoenry, AZ 85001 | |
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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

| In Re: Ayanna Nicole Lee |) | |
|--------------------------|---|----------|
| |) | |
| Debtor (s) |) | Case No. |
| |) | Chapter |
| |) | |

List of Creditors

| Capital and Platining | |
|--|---|
| Capital one Platinum PO Box 20235 | Ulta Ultamate Rewards |
| Sout Lake City, UT 84130- | Comenity Capital Bank |
| 0985 | 1 60 ROX 1833-13 |
| Capital One Quicksilver | Columbus, 04 43218 |
| PO BOY 30285 | Numan Marcus/Capitalone |
| Salt Lake City, UT 94130-0185 | PO BOX 729080 |
| | Dallas, TX 75377 -9080 |
| Capitalone Venture One | |
| 1- 40 pox 202 22 | Victoria's Secret |
| Sout Lake City, UT 84130-089 | Lomenity Bank Po Box 182273 |
| The | L (£)[[][[[]][[]][[]][[]][[]][[]][[]][[]][[|
| TJX Rewards Synchrony Bank PO BOX QUESO30 | West Elm Comenity Range |
| PO 80% 9 (45 030) | Po Box 182273 |
| Orlando, FL 32894-5030 | Columbus LOH 43218 |
| | 1005 LOH 430 18 |
| Macy's Bankruptey Processing PO BOX 8053 | Lumois Department of Revenue |
| | Bankruptcy section PO BOX 104338 |
| Mason 104 45040 | Chicago T) 4338 |
| | Chicago, IL 60664-0338 |

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| Fill in this information to identify your case: | |
|---|--|
| Debtor 1 Ayunna Nicole Loo | |
| First Name Middle Name Last Name Debtor 2 | |
| Spouse, if filing) First Name Middle Name Last Name | |
| Inited States Bankruptcy Court for the: Northern District of Illinois | |
| Case number (if known) | |
| | ☐ Check if this is |
| | amended filing |
| Official Form 106Dec | |
| Declaration About an Individual Debtor's Sched | _ |
| | ules 12/15 |
| If two married people are filing together, both are equally responsible for supplying correct information. | |
| You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false staten obtaining money or property by fraud in connection with a hankruptcy some convey the file. | nent, concealing property, or or imprisonment for up to 20 |
| You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false staten obtaining money or property by fraud in connection with a hankruptcy some convey the file. | or imprisonment for up to 20 |
| You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false staten obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's N | or imprisonment for up to 20 |

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| Lian. | of Michala | | | |
|--|-------------------------------|--|--|---|
| ebtor 1 First Name | Middle Name | Last Name | | |
| ebtor 2 pouse, if filing) First Name | Middle Name | | | |
| | · · · · | Last Name | | |
| | urt for the: Northern Distri | | | |
| se number | | | | |
| | | | | ☐ Check if this is: |
| official Form 1 | 06A/R | | | amended filing |
| | NB: Prope | ~4 | | |
| | | tems. List an asset only once. If an asset fits in mor | | 12/15 |
| t 1: Describe Eac | h Residence, Buildii | npiete and accurate as possible. If two married people from the space is needed, attach a separate sheet to the sawer every question. In the same sheet to the same sheet the | ave an interest in | rany additional page |
| Yes. Where is the pro | operty? | | | |
| • | 7 | What is the property? Check all that apply. | | |
| 1.1. | | ☐ Single-family home | Do not deduct secured of | claims or exemptions. Put ed claims on <i>Schedule D</i> |
| Street address, if ava | ailable, or other description | Duplex or multi-unit building | Creditors Who Have Cla | ed claims on Schedule D ilms Secured by Property. |
| | | Condominium or cooperative | Current value of the | Current value of the |
| | | ☐ Manufactured or mobile home ☐ Land | entire property? | portion you own? |
| | | ☐ Investment property | \$ | \$ |
| City | State ZIP Cod | The activity property | Describe the nature | of your ownership |
| | 217 000 | Other | interest (such as fee the entireties, or a life | Simple tenancy by |
| | | Who has an interest in the property? Check one. | , | |
| County | ···· | Debtor 1 only | w | |
| County | | □ Debtor 2 only □ Debtor 1 and Debtor 2 only | D Charlier . | |
| | | ☐ At least one of the debtors and another | Check if this is co | mmunity property |
| | | Other information you wish to add about this it. | · | |
| | | property identification number: | eni, such as local | |
| (OL 0010 or have | | | | |
| ou own or have more th | nan one, list here: | AND THE STATE OF T | | lims or exampliana Dut |
| ou own or have more th | nan one, list here: | What is the property? Check all that apply. | Do not deduct secured dia | mina or exemptions, put |
| 2 | | ☐ Single-family home | Do not deduct secured cla | d claims on Schodula D. |
| 2 | nan one, list here: | ☐ Single-family home ☐ Duplex or multi-unit building | Do not deduct secured cla the amount of any secured Creditors Who Have Clain | d claims on Schodula D. |
| 2 | | ☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative | Creditors Who Have Clain Current value of the | d claims on Schedule D: ns Secured by Property, Current value of the |
| 2 | | ☐ Single-family home ☐ Duplex or multi-unit building | Creditors Who Have Clain | d claims on Schedule D: ns Secured by Property. |
| 2 | | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | Creditors Who Have Clain Current value of the | d claims on Schedule D: ns Secured by Property. Current value of the |
| 2. Street address, if availa | | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare | Current value of the entire property? Describe the nature of | d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$ |
| 2Street address, if availa | able, or other description | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other | Current value of the entire property? | d claims on Schedule D: as Secured by Property. Current value of the portion you own? \$ f your ownership |
| 2Street address, if availa | able, or other description | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. | Current value of the entire property? Describe the nature of interest (such as fee since the continuous conti | d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$ |
| 2Street address, if availa | able, or other description | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. | Current value of the entire property? Describe the nature of interest (such as fee since the continuous conti | d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$ |
| 2. Street address, if available of the street address of the street address of available of the street address of available of the street address of th | able, or other description | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Current value of the entire property? Describe the nature of interest (such as fee sthe entireties, or a life | d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$ f your ownership simple, tenancy by estate), if known. |
| 2. Street address, if available of the street address of the street address of available of the street address of available of the street address of th | able, or other description | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Current value of the entire property? Describe the nature of interest (such as fee since the continuous conti | d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$ f your ownership simple, tenancy by estate), if known. |

Case 18-16992 Doc 1 Filed 06/14/18 Entered 06/14/18 09:27:18 Desc Main Document Page 13 of 57 Case number (if known) What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put Single-family home the amount of any secured claims on Schedule D: Street address, if available, or other description Duplex or multi-unit building Creditors Who Have Claims Secured by Property. Condominium or cooperative Current value of the Current value of the entire property? Manufactured or mobile home portion you own? ☐ Land ■ Investment property City State ZIP Code ☐ Timeshare Describe the nature of your ownership interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Debtor 1 and Debtor 2 only ☐ Check if this is community property At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G. Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Make: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Debtor 1 only Model: the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage. entire property? At least one of the debtors and another portion you own? Other information: Check if this is community property (see instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only

Year:

Approximate mileage:

Other information:

instructions)

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this is community property (see

portion you own?

Current value of the
Current value of the

entire property?

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Case number (if known)

3.3. Make: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Debtor 1 only Model: the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: At least one of the debtors and another entire property? portion you own? Other information: Check if this is community property (see instructions) Who has an interest in the property? Check one. 3.4. Make: Do not deduct secured claims or exemptions. Put Debtor 1 only Model: the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: At least one of the debtors and another entire property? portion you own? Other information: Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories **☑** No ☐ Yes Who has an interest in the property? Check one. Make: 4.1. Do not deduct secured claims or exemptions. Put Debtor 1 only Model: the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another Current value of the Current value of the entire property? portion you own? ☐ Check if this is community property (see instructions) If you own or have more than one, list here: Make: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: entire property? At least one of the debtors and another portion you own? ☐ Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

Debtor 1

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Case number (if known)________

| D = = = = = = = = = = = = = = = = = = = | | | | Household | |
|---|------|----------|-----|-----------|-------|
| Describe | Your | Personal | and | Household | Itame |

| Do you own or have any legal or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claim |
|--|--|
| 6. Household goods and furnishings | or exemptions. |
| Examples: Major appliances, furniture, linens, china, kitchenware | |
| □ No | |
| Per Describe Beds, Couch, Pots and Pans | \$ <i>2</i> 00.00 |
| Livet onles | - · · · · · · · · · · · · · · · · · · · |
| Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No | |
| Gres. Describe | \$75.00 |
| 8. Collectibles of value | ************************************** |
| Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles | |
| Yes. Describe | sO |
| 9. Equipment for sports and hobbles | of a consequence of the conseque |
| Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments | |
| Yes. Describe | <u>\$O</u> |
| 10. Firearms | -terrar-anama |
| Examples: Pistols, rifles, shotguns, ammunition, and related equipment | |
| Yes. Describe | \$ |
| 11. Clothes | pperson of the second |
| Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories | - |
| Yes. Describe | \$ 150.00 |
| 12. Jewelry | |
| Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver | |
| Yes. Describe | \$O |
| 13. Non-farm animals Examples: Dogs, cats, birds, horses | |
| Q No | |
| Yes. Describe | s 1.00 |
| 14. Any other personal and household items you did not already list, including any health aids you did not list | |
| ☑ Yes. Give specific | |
| information. | \$O |
| 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here | s 426.00 |
| | |

Debtor 1

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Case number (if known)_

| - | - | | |
|---|---|--|--|
| | | | |
| | | | |

Describe Your Financial Assets

| Do you own or have an | y legal or equitable interest in | any of the following? | Current value of the portion you own? Do not deduct secured claim or exemptions. |
|---|--|--|---|
| 16. Cash <i>Examples:</i> Money you | u have in your wallet, in your ho | me, in a safe deposit box, and on hand when you file your p | na kiki na |
| □ No | | | petition |
| \(Yes | | Cash: | \$ 10.00 |
| 17. Deposits of money Examples: Checking, and other s | savings, or other financial acco similar institutions. If you have n | unts; certificates of deposit; shares in credit unions, brokera nultiple accounts with the same institution, list each. | age houses, |
| ☐ Yes | | Institution name: | |
| | 17.1. Checking account: | Chase | \$ 50.00 |
| | 17.2. Checking account: | | |
| | 17.3. Savings account: | Chase | - 8.10 |
| | 17.4. Savings account: | | e . |
| | 17.5. Certificates of deposit: | | |
| | 17.6. Other financial account: | | 5 |
| | 17.7. Other financial account: | | 5 |
| | 17.8. Other financial account: | | \$ |
| | 17.9. Other financial account: | | Ψ |
| | | | \$ |
| 8. Bonds, mutual funds, Examples: Bond funds, No Yes | or publicly traded stocks investment accounts with broke institution or issuer name: | erage firms, money market accounts | |
| | monator of locals Harro. | | |
| | | | \$ |
| | Allerta and a second a second and a second a | | <u> </u> |
| | | | <u> </u> |
| e. Non-publicly traded st an LLC, partnership, a | cock and interests in incorporand joint venture | ated and unincorporated businesses, including an inter | rest in |
| No No | Name of entity: | % of owne | rship: |
| Yes. Give specific information about | | 0% | % \$ |
| them | | 0% | _% \$ |
| | | 0% | % \$ |

| Case 18-1 Debtor 1 Fist Name | 16992 Doc 1 Filed 06/14/18 Entered 06/14/18 09:27:18 October Document Page 17 of 57 Case number (if known) Cas | Desc Main |
|---|--|--|
| Negotiable instruments Non-negotiable instrun | porate bonds and other negotiable and non-negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders, nents are those you cannot transfer to someone by signing or delivering them. | |
| No Yes. Give specific information about them | Issuer name: | - \$ <u>O</u> |
| 21. Retirement or pension Examples: Interests in I | accounts RA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing pla | - \$ <u> </u> |
| ✓ Yes. List each account separately. 22. Security deposits and property of all unused Examples: Agreements we companies, or others | Pension plan: Pension plan: Northwestern Memonal Hospital Pension F IRA: Retirement account: Keogh: Additional account: NA Additional account: NA Additional account: NA | \$ 19,221.50 Plan \$ 23,089.32 \$ 0 \$ 0 \$ 0 \$ 0 |
| Yes | Institution name or individual: Electric: COMEC Gas: NA Heating oil: NA Security deposit on rental unit: NA Prepaid rent: NA Telephone: NA Water: NA Cher: NA | \$ 55.00 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ |
| ⊉ No | ssuer name and description: | \$ <u>O</u> \$ <u>O</u> \$ O |
| Official Form 106A/B | Schedule A/B: Property | page 6 |

Case 18-16992 Doc 1 Entered 06/14/18 09:27:18 Filed 06/14/18 Desc Main Page 18 of 57 Document Debtor 1 Case number (if known 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U₂S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Νo ☐ Yes Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit **V**Ø No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No No ☐ Yes. Give specific information about them... \$ 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses Νo ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you **∕**Ø No Yes. Give specific information about them, including whether Federal: you already filed the returns State: and the tax years..... Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement Yes. Give specific information..... Alimony: Maintenance: Support: Divorce settlement: Property settlement 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

Official Form 106A/B

Yes. Give specific information.....

No

Entered 06/14/18 09:27:18 Case 18-16992 Doc 1 Filed 06/14/18 Desc Main Page 19 of 57 Debtor 1 Case number (if known) 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No No Yes. Name the insurance company Company name: Beneficiary: of each policy and list its value.... Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. **₩**No Yes. Give specific information..... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No. Yes. Describe each claim. 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Describe each claim. 35. Any financial assets you did not already list ☐ Yes. Give specific information..... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. Part 5: 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38 Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned M No Yes. Describe... 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

Yes. Describe...

M No

| 11 / | 16992 - Doc 1 Middle Name | Filed 06/14/18 Document | Page 20 of 57 | | Desc Main |
|-----------------------------|---|--|--|--|--|
| 40 Machinery fixtures | aquinment ave = "- | | | | |
| 40 Machinery, fixtures, | equipment, supplies y | ou use in business, and | d tools of your trade | | |
| Yes. Describe | | engaga | region of 1 12 11886 deVelorina (1.654) is commented in the control of the contro | | |
| Tes. Describe | | | | | c |
| | | adente esperale communica (ES) and description of the trade communication between the description of the second | | of community and control of the second of th | V |
| 41.Invertory | | | | | |
| ₩ No | | | 1.000005.000.000.000.000.000.000.000.000 | | WOTT TO A CONT |
| Yes. Describe | | | | | S |
| , | | 00 1994 N. S. Markola V. H. September (1994) | | | ************************************** |
| 42.Interests in partnersh | ips or joint ventures | | | | |
| ☑ No | | | | | |
| ☐ Yes. Describe | Name of entity: | | | % of ownership: | |
| | **** | | | % of ownership. | • |
| | | | | % | \$ |
| | | | • | % | \$ \$ |
| 43. Customer lists, mailin | a lieto ar other | L.o. | | | ¥ |
| No | y lists, or other compil | lations | | | |
| Yes. Do your lists | include personally ide | Otifiable information (a | s defined in 11 U.S.C. § 101(41A)) | | |
| ☐ No | | | | | |
| Yes. Descr | ibe | en e e e e e e e e e e e e e e e e e e | The control of the co | and the second of the second o | *************************************** |
| | | | | | \$ |
| 44. Any business-related p | aronorty you did a set at | | and the second s | ALLANDON MARKA SALANA SALAMA SALAMA SALAMA ANAMARAN (A. S. MARKA SALAMA | |
| No No | noperty you did not at | ready list | | | |
| Yes. Give specific | | | | | |
| information | | | | | \$ |
| • | | | | 7.1 | \$ |
| | | | | | \$ |
| - | | | | | \$ |
| - | | | *** | | Φ |
| | | | | ···· | 3 |
| 45. Add the dollar value of | all of your anti t | | | | \$ |
| for Part 5. Write that nu | mber here | n Part 5, including any | entries for pages you have attac | hed | s |
| | | *************************************** | | → | |
| Congression | | | | | |
| Part 6: Describe Any | Farm- and Comme | rcial Fishing-Related | Property You Own or Have | | |
| If you own or h | ave an interest in farm | land, list it in Part 1. | openty for Own of Mave | an interest li | 1. |
| 46 Do you own on house | | | | | |
| No. Go to Part 7. | legal or equitable inte | erest in any farm- or co | nmercial fishing-related proper | ty? | |
| Yes. Go to line 47. | | | | | |
| | | | | | |
| | | | | | Current value of the |
| | | | | | portion you own? Do not deduct secured claims |
| 7. Farm animals | | | | | or exemptions. |
| Examples: Livestock, poul | try, farm-raised fish | | | | |
| □ No | | | | | |
| ☐ Yes | elyme Yana dadadah mengumuya kadaman melifik berpilah yana dalah memberadi yanggapa kadamanya ya 22m | hm | өөлүү жана аламындар үчүүдүү каналаруунун байтарын каналаруу байтарын карабыр күшүнө каламындаруу күшүнө катам | taming services Associated by the large and the services of the constitution of the co | garage. |
| | | | | | |
| ! | Salad Start da Sajak gali para mandan mengalah da Salad Asabas da Ajaman yang paga an Albas mengan paga | characht ann a mar garagaidh a characht Africann A r Africann A garagaidh a dhachdrainn a garagaidh a Annaich A gailteagaidh a Annaich | والمقاومة والمراوية والمرا | and by a self-stand or a second control of the second or desired by the property of the second or and the second of the second or an extension of the second | \$ |
| 200 | | | | | |
| Official Form 106A/R | | 0-1 | | | |

| | 16992 Doc 1 Filed 06/ | nent Page 21 of 57 | /18 09:27:18 D | esc Main |
|--|---|-----------------------------------|----------------------------|-------------|
| 48. Crops—either growi | | | | |
| Yes. Give specific information | | | | |
| 49. Farm and fishing equal No | Jipment, implements, machinery, fixt | ures, and tools of trade | | \$ |
| 50. Farm and fishing sup No Yes | plies, chemicals, and feed | | | \$ |
| 51. Any farm- and commo | ercial fishing-related property you did | d not already list | | \$ |
| information | | | | \$ |
| 52. Add the dollar value of for Part 6. Write that r | of all of your entries from Part 6, inclu number here | ıding any entries for pages you h | ave attached | \$ |
| Part 7: Describe | All Property You Own or Have | an Interest in That You i | Did Not List Above | |
| 53. Do you have other pro Exameles: Season tickets, No Yes. Give specific information | perty of any kind you did not already country club membership | | | \$ \$ |
| 54. Add the dollar value of | all of your entries from Part 7. Write | | → | \$ \$O |
| Part 8: List the To | tals of Each Part of this Forn | n | | į. |
| 55. Part 1: Total real estate | , line 2 | | → | s_O_ |
| 56. Part 2: Total vehicles, ii | | <u>\$3,320.00</u> | | |
| | nd household items, line 15 | s 426.00 | | |
| 58. Part 4: Total financial as | | <u>\$42,426.82</u> | | |
| 59. Part 5: Total business-re | | \$ <u> </u> | | |
| | ishing-related property, line 52 | sO | | |
| 61. Part 7: Total other prope62. Total personal property. | Add lines 56 through 61. | +\$ 0 \$46,171.82 Copy pe | ersonal property total → 🔹 | +=46.171.87 |
| 63. Total of all property on S | ichedule A/B. Add line 55 + line 62 | | r | s46,171.82 |
| Official Form 106A/B | Schedule . | A/B: Property | _ | page 10 |

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| Fill in this information to id | entify your case: | | |
|---|---|-----------|---------------------------------------|
| Debtor 1 HANNA | | el | |
| Debtor 2 (Spouse, if filing) First Name | Middle Name | Last Name | |
| United States Bankruptcy Court f | Middle Name or the: Northern District of III | Last Name | |
| Case number | or are: Morarcia Sistrict of It | uiois | |
| (If known) | | | Check if this is ar amended filing |
| | | | amended milig |

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| 2. For any property you list on Schedule A/B | that you claim as exem | pt, fill in the information below. | |
|--|--------------------------------------|---|-----------------------------------|
| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemptio |
| (Car) | Copy the value from Schedule A/B | Check only one box for each exemption. | |
| Brief description: 2007 Honda Accord | L, 3, 320 | - \$ | 735 LCS 5/12-100/ |
| Line from Schedule A/B: 3.1 | · | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: Household goods | \$ 200,000 | □s | 735 1165 5/12-10016 |
| Line from Schedule A/B: | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief Electronics | \$ 75,00 | □s | 7351LCS 5/12-10016 |
| Line from Schedule A/B: | | 100% of fair market value, up to any applicable statutory limit | |

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Debtor 1

| Λ | | | | _ 000. |
|------------|----------|-----|---------|--------|
| Hyar | ma | NIC | ole | Lee. |
| First Name | Middle N | ame | Last Na | |

Case number (if known)____

| Part 2: Additional Page | | | |
|--|--------------------------------------|---|--|
| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| The state of the s | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Brief description: Cothes | s 150 c00 | 0: 150:00 | 735 ILCS 5/12-10 |
| Line from Schedule A/B: | | 100% of fair market value, up to any applicable statutory limit | 62516545/3A-7 |
| Brief description: | <u>s 1.00</u> | Os 1.00 | |
| Line from Schedule A/B: 13 | | ☐ 100% of fair market value, up to any applicable statutory limit | 135 TLCS 45/3A-7 |
| Brief Cash description: | \$ 10.00 | Ds_10,00 | |
| Line from 16 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief Deposits ormone | \$ 50.00 | 0,50.00 | the property of the second sec |
| Line from 17 Schedule A/B: | | 100% of fair market value, up to any applicable statutory limit | |
| Brief 40(6) | ,19,221.50 | | 40165517-217 |
| Line from Schedule A/B: | • | 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1006 |
| Brief Security Deposits | <u>\$ 55.00</u> | a: 55,00 | |
| Line from Schedule A/B: | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief Pension: | <u>623,0893</u> | 0:33,03932 | 401165 5/7-217 |
| Line from 2) Schedule A/B: | | 100% of fair market value, up to | 135 145 5/12-704 135 145 5/12-104 |
| Brief Life Mowand | \$ | □ \$ | |
| Line from Schedule A/B: | | 100% of fair market value, up to | |

| | on Schedu | ule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
|---|--|----------------------------------|---|---|--|
| | A state of the sta | | Copy the value from Schedule A/B | Check only one box for each exemption | |
| | Brief description: | Clothes | \$ 150,00 | _ Ds 150:00 | 735 ILCS 5/12-1001 |
| | Line from Schedule A | лв: 4 1 — | | ☐ 100% of fair market value, up to any applicable statutory limit | 695 11CS 45/3A-7 |
| *************************************** | Brief description: | Dog | s_1.00 | _ 0; 1.00 | |
| /Management of the company of | Line from Schedule A | B: 13 | | ☐ 100% of fair market value, up to any applicable statutory limit | 625/165 45/3A-7 735 TLCS 5/12-100/ |
| | Brief description: | Cash | s_10,00 | D: 10,00 | |
| | Line from Schedule A/ | | ** ==== · · · · · · · · · · · · · · · · | 100% of fair market value, up to any applicable statutory limit | |
| | Brief description: Line from | Deposits ormone | \$ <u>50.00</u> | 0\$ <u>50.00</u> | - |
| | Schedule A/L Brief | 7 | 10: | 100% of fair market value, up to any applicable statutory limit | |
| | description: Line from Schedule A/E | 191 tor(k) | · 191991.50 | □ \$ 19,381.50 □ 100% of fair market value, up to any applicable statutory limit | 4011CS 5/7-217 735 11CS 5/12-704 73511CS 5/12-1006 |
| | Brief 5 | ecurity Deposits | CCOA | - | 120023414 |
| | description: Line from Schedule A/B | 22 | <u>\$ 55,00</u> | □ \$ 55 (○○) □ 100% of fair market value, up to any applicable statutory limit | |
| | Brief description: | Pension | s 23,089 3 | 0:33,039.32 | 401165 5/7-217 |
| | Line from Schedule A/B: | 21 | • | 100% of fair market value, up to | 735 14CS 5/12-704 |
| | Brief description: | Life Insurance | \$ | D \$ | 1321-32 STIO 1900 |
| | Line from Schedule A/B: | 31 | | 100% of fair market value, up to any applicable statutory limit | |
| | Brief description: | | \$ | D s | |
| | Line from Schedule A/B: | | | 100% of fair market value, up to any applicable statutory limit | |
| | Brief description: | | \$ | D s | |
| | Line from Schedule A/B: | | | 100% of fair market value, up to any applicable statutory limit | |
| | Brief description: | | \$ | Q s | |
| | Line from Schedule A/B: | | | 100% of fair market value, up to any applicable statutory limit | |
| | Brief description: | | | □ s | |
| | Line from Schedule A/B: | | | 100% of fair market value, up to any applicable statutory limit | |
| | | | | | |

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| Fill in this information to identify your c | case: | | | | | |
|---|--|---|--|--|--|--|
| Acres At. | rola | 100 | | | | |
| First Name Midd | die Name | Last Name | | | | |
| Debtor 2 (Spouse, if filling) First Name Midd | lie Name | Last Name | | | | |
| United States Bankruptcy Court for the: Norther | rn District of II | | | | | |
| Case number | = 1011102 07 () | | | | | |
| (If known) | | | | | ☐ Check | if this is an |
| | | | | | ameno | led filing |
| Official Form 106D | | | | | | |
| Schedule D: Credito | rs Who | Have Cla | ims Secur | ed by Pro | nortv | |
| Be as complete and accurate as possible | e. If two marr | ied neonle are filing | togothor both aver | | | 12/15 |
| information. If more space is needed, co additional pages, write your name and ca | | | number the entries, | qually responsible and attach it to thi | tor supplying corrects form. On the top of | t fany |
| 1 · 3 · · · · · · · · · · · · · · · · · | ase manner (| ii kilowii). | | | · | |
| 1. Do any creditors have claims secured | by your prop | perty? | | | | |
| No. Check this box and submit this fo | orm to the cou | rt with your other sche | dules. You have noth | ing else to report on | this form. | |
| Yes. Fill in all of the information below | W. | | | | | |
| Part 1: List All Secured Claims | | | | | | |
| | | | | Column A | 6 | U.S. Varios and San |
| List all secured claims. If a creditor has for each claim. If more than one creditor | more than one | e secured claim, list th | e creditor separately | Amount of claim | Column B Value of collateral | Column C Unsecured |
| As much as possible, list the claims in alp | habetical orde | ar craim, list the other er according to the cre | creditors in Part 2. ditor's name. | Do not deduct the | that supports this | portion |
| 2.1 | | | | value of collateral. | claim | If any |
| Creditor's Name | Describe t | he property that secur | es the claim: | \$ | \$ | \$ |
| | | | | | | |
| Number Street | | THE REAL PROPERTY OF THE PARTY | What is a second of the second | - The second sec | | |
| | | ate you file, the claim | is: Check all that apply. | | | |
| | Conting Unliquid | | | | | |
| City State ZIP Code | Disputer | | | | | |
| Who owes the debt? Check one. | Nature of Ii | en. Check all that apply. | | | | |
| Debtor 1 only | | ement you made (such as | mortnage or secured | | | |
| Debtor 2 only | car loan |) | | | | |
| Debtor 1 and Debtor 2 only | Statutor | y lien (such as tax lien, m | echanic's lien) | | | |
| At least one of the debtors and another | U Judgmer | nt lien from a lawsuit icluding a right to offset) _ | | | | |
| Check if this claim relates to a community debt | — Oniei (iii | icading a right to offset) _ | | | | |
| Date debt was incurred | Last 4 digit | s of account number | | | | |
| ner en grecom a compression de mais a compression de compression de compression de compression de compression L. 2 | a ememplante de la companyación de | e property that secure | | NASADYONGWANGARANGARANGANANGANINGAN KIR | | SCCS-manderspectually Control III Control Processing |
| Creditor's Name | " | e property that secure | s the claim: | \$ | \$\$ | |
| Number Street | | | | | | |
| Number Street | As of the de | | | | | |
| We was a second of the second | Continge | ite you file, the claim i | \$: Check all that apply. | | | |
| | Unliquida | | | | | |
| City State ZIP Code | Disputed | | | | | |
| Who owes the debt? Check one. | Nature of lie | n. Check all that apply. | | | | |
| Debtor 1 only Debtor 2 only | An agree | ment you made (such as | mortgage or secured | | | |
| Debtor 2 only Debtor 1 and Debtor 2 only | car ioan) | | | | | |
| At least one of the debtors and another | | lien (such as tax lien, me t lien from a lawsuit | chanic's lien) | | | 100011111111111111111111111111111111111 |
| | | cluding a right to offset) _ | | | | |
| Check if this claim relates to a community debt | | • — | | | | |
| | | | | | | |
| Date debt was incurredAdd the dollar value of your entries in C | Last 4 digits | of account number | | | | |

Debtor 1

| Part 1: Additional Page Part 1: After listing any entries on the by 2.4, and so forth. | is page, number them beginning with 2.3, followed | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | portion |
|--|--|---|--|---|
| | Describe the property that secures the claim: | \$ | _ | |
| Creditor's Name | | ~ | _ • | \$ |
| Number Street | | | | |
| | | | | |
| | As of the date you file, the claim is: Check all that apply. | nani ^a | | |
| City State ZIP Code | Contingent Unliquidated | | | |
| July 21 Code | Disputed | | | |
| Who owes the debt? Check one. | · · | | | |
| Debtor 1 only | Nature of lien. Check all that apply. | | | |
| Debtor 2 only | An agreement you made (such as mortgage or secured car loan) | | | |
| Debtor 1 and Debtor 2 only | Statutory lien (such as tax lien, mechanic's lien) | | | |
| At least one of the debtors and another | Judgment lien from a lawsuit | | | |
| Check if this claim relates to a | Other (including a right to offset) | | | |
| community debt | | | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| 2004 41 41 44 45 45 10 10 10 10 10 10 10 10 10 10 10 10 10 | 45-11-11-11-11-11-11-11-11-11-11-11-11-11 | anteriorista (la companio de la comp | NA PRANCIS PARAGONAL SERVICIO A SPRINGA A SPRINGA A SPRINGA A A SPRINGA A A SPRINGA A SPRINGA A A SPRINGA A SPRINGA A A SPRINGA A SPRING | |
| Creditor's Name | Describe the property that secures the claim: | \$ | \$ s | ALCO COLLEGE OF COLUMN STATES OF THE STATES |
| STATE OF MARKET | | | • | |
| Number Street | _ | | | |
| | As of the date you file, the claim is: Check all that apply. | | | |
| | Contingent | | | |
| City State ZIP Code | Unliquidated | | | |
| Who owes the debt? Check one. | ☐ Disputed | | | |
| Debtor 1 only | Nature of lien. Check all that apply. | | | |
| Debtor 2 only | An agreement you made (such as mortgage or secured car loan) | | | |
| Debtor 1 and Debtor 2 only | Statutory lien (such as tax lien, mechanic's lien) | | | |
| At least one of the debtors and another | Judgment lien from a lawsuit | | | |
| Check if this claim relates to a | Other (including a right to offset) | | | 100 |
| community debt | | | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| | | PON CONTRACTOR AND | | - |
| Creditor's Name | Describe the property that secures the claim: \$ | | \$ | estimo o resortante de contrata e paga per que |
| Oreanor's Name | | | ΨΨ | |
| Number Street | | | | |
| | | | | |
| | As of the date you file, the claim is: Check all that apply. | | | |
| City State ZIP Code | ☐ Contingent ☐ Unliquidated | | | |
| | Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | * |
| Debtor 1 only | An agreement you made (such as mortgage or secured | | | |
| Debtor 2 only | car loan) | | | |
| Debtor 1 and Debtor 2 only | Statutory lien (such as tax lien, mechanic's lien) | | | |
| At least one of the debtors and another | Judgment lien from a lawsuit | | | |
| Check if this claim relates to a community debt | Other (including a right to offset) | | | |
| Date debt was incurred | Last 4 digits of account number | | | 1 |
| Add the dollar value of your and | | 4 | | 1 |
| If this is the lest name of your entries | in Column A on this page. Write that number here: | | | |
| Write that number here: | add the dollar value totals from all pages. | | | - |
| The second of th | | | | |

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Case number (if known)

| you nave | page only if you have othe trying to collect from you more than one creditor fo d for any debts in Part 1, o | r any of the dobte to | and constitute of the man | for a debt that you already listed in Part 1. For example, if a collection st the creditor in Part 1, and then list the collection agency here. Similarly, if 1, list the additional creditors here. If you do not have additional persons to |
|----------|---|-----------------------|---------------------------|---|
| Name | | | | On which line in Part 1 did you enter the creditor? |
| ivalile | | | | Last 4 digits of account number |
| Numbe | or Street | | | |
| City | | State | | |
| | en er er en de mit er er er en de groet dan er en andere gevannen meget de groet en en andere | Sidle | ZIP Code | |
| Name | | | | On which line in Part 1 did you enter the creditor? |
| | | | | Last 4 digits of account number |
| Number | Street | | | |
| City | | State | ZIP Code | |
| Name | -/\ | | | On which line in Part 1 did you enter the creditor? Last A digits of account number |
| Number | Street | | | -11- |
| | | | | |
| City | $moderate (mit) + 1 + r mit) \left\{ -2 (2 + m m'r) + 1 + \frac{2}{3} (2 + m m'r) + \frac{2}{3} (2 +$ | State | ZIP Code | |
| Name | <u> </u> | | | On which line in Part 1 did you enter the creditor? |
| Number | Street | | 1 | Last 4 digits of account number |
| ···· | | - WHOLE WILL | | ··· |
| City | | State | ZIP Code | _ |
| Name | | | | On which line in Part 1 did you enter the creditor? |
| | | | | Last 4 digits of account number |
| Number | Street | | | _ |
| City | | | | |
|] | ······································ | State | ZIP Code | |
| Name | | | | On which line in Part 1 did you enter the creditor? |
| | | | | Last 4 digits of account number |
| Number | Street | 444 | | • |
| | | | | |
| City | | State | ZIP Code | • |

Case 18-16992 Filed 06/14/18 Entered 06/14/18 09:27:18 Desc Main Doc 1 Page 27 of 57 Document Fill in this information to identify your case: Debtor 1 Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Check if this is an (If known) amended filing Official Form 106F/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. 🗹 Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Priority** amount Dept of Kevenue Last 4 digits of account number 5 994 When was the debt incurred? As of the date you file, the claim is: Check all that apply. 3ン□ Contingent Unliquidated Who incurred the debt? Check one Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were Is the claim subject to offset? intoxicated **⊘** No Other, Specify Yes 2.2 Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were Check if this claim is for a community debt intoxicated Is the claim subject to offset? Other, Specify ☐ No Yes

Debtor 1

Entered 06/14/18 09:27:18 Desc Main Page 28 of 57 Sase number (# known)

| Arter listing any entries on this page, number the | m beginning with 2.3, followed by 2.4, and so forth. | Total claim | Priority amount | Nonpriorii amount |
|--|--|--|---|--|
| Priority Creditor's Name Number Street | Last 4 digits of account number When was the debt incurred? | \$ | . \$ | \$ |
| Number Street | As of the date you file, the claim is: Check all that apply. | | | |
| City State ZIP Code Who incurred the debt? Check one. | Unliquidated Disputed | | | |
| ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt | Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other Specify | | | |
| Is the claim subject to offset? No Yes | Other. Specify | | | |
| Priority Creditor's Name | | \$ | | |
| Number Street | When was the debt incurred? As of the date you file, the claim is: Check all that apply. | | | |
| City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | ☐ Contingent ☐ Unliquidated ☐ Disputed Type of PRIORITY unsecured claim: ☐ Domestic support obligations ☐ Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were | | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ No ☐ Yes | intoxicated Other. Specify | | | |
| Priority Creditor's Name | Last 4 digits of account number\$ | ************************************** | \$ | |
| Number Street | When was the debt incurred? | | | |
| City State ZIP Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed | | | |
| Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were | | | and the second s |
| ☐ Check if this claim is for a community debt | Claims for death or personal injury while you were intoxicated Other. Specify | e edicely respective Committee de la respectiva de la respectiva de la respectiva de la respectiva de la respe | ing uniquiness is when in each possibility continues to the est | |
| Is the claim subject to offset? No Yes | | | | Toping to a second seco |

Filed 06/14/18 Entered 06/14/18 09:27:18 Page 29 of 57
Case number (if known) Degument Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured Total claim Last 4 digits of account number 5043When was the debt incurred? 2015 As of the date you file, the claim is: Check all that apply. Contingent Who incurred the debt? Check one Unliquidated Debtor 1 only Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts No. Other. Specify CVC at ☐ Yes Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Who incurred the debt? Check one Unliquidated Debtor 1 only Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts **☑** No Other Specify Creat Caro ☐ Yes Last 4 digits of account number 4 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Why incurred the debt? Check one. ☐ Çentingent Unliquidated Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce

No.

Yes

Is the claim subject to offset?

that you did not report as priority claims

Other. Specify Creat Cara

Debts to pension or profit-sharing plans, and other similar debts

Debtor 1

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Case number (if known)

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| | ation rage | |
|---|--|-----------------|
| After listing any entries on this page, number them beginning with | 4.4, followed by 4.5, and so forth. | Total claim |
| Nonpriority Creditor's Name PO BOX 9053 Number Street MGSON City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? | When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify CIPALL CATA | 2 ,275.4 |
| Nonpriority Creditor's Name POBOX 739080 Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? | Last 4 digits of account number \(\frac{1}{2016} \) When was the debt incurred? \(\frac{2016}{2016} \) As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Clean Card | \$3,698.81 |
| Nonpriority Creditor's Name PO BOX 9165030 Number Street Or Land 0 FL 33.996-5030 City FL 33.996-5030 Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obtigations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify | \$353.35 |

| Debtor | 1 | |
|--------|---|--|

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| Debtor 1 First Name Middle Name Last Name Page |
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|--|

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|------|--------------|-----------|------|
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| M . | ERION | PH. | - |
| 8 | r: 1 | ė E | r. F |
| SALE | ASSESS OF | Sue. | mak. |

Your NONPRIORITY Unsecured Claims — Continuation Page

| After listing any entries on this page, number them beginning with | 4.4, followed by 4.5, and so forth. | Total claim |
|---|--|----------------|
| 111 Can | nemby | |
| 1 ' ' | | ം കടു |
| Nonpriority Creditor's Name PO BOX 192135 | When was the debt incurred? | s <u>602.5</u> |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| City State ZIP Code | Contingent | |
| Who incurred the debt? Check one. | ∭ Unliquidated ☐ Disputed | |
| Debtor 1 only | ☐ Disputed | |
| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only | ☐ Student loans | |
| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that | |
| ☐ Check if this claim is for a community debt | you did not report as priority claims | |
| Is the claim subject to offset? | Debts to pension or profit-sharing plans, and other similar debts | |
| XÍ No | M Other, Specify Creat Cara | |
| Yes | | |
| | | |
| 19 Victoria's Secret/Comenity Bar | 1 Last 4 digits of account number 6 34 6 | \$1200.0 |
| PO BOX 182:125 | When was the debt incurred? $\partial \Theta \varphi$ | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| Columbus OH 432182 | 1005_ | |
| | Contingent Diput | |
| Who incurred the debt? Check one. | Disputed | |
| Debtor 1 only | | |
| U Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | ☐ Student loans | |
| | Obligations arising out of a separation agreement or divorce that | |
| ☐ Check if this claim is for a community debt | you did not report as priority claims | |
| is the claim subject to offset? | Debts to pension or profit-sharing plans, and other similar debts Other. Specify Crean Care | |
| X €No | Outer, specify Creater Cay C | |
| Tyes | | |
| 9 | | |
| Wost Elm Komenity Bank | Last 4 digits of account number 1 2 8 1 | 36.60Ps |
| PO BOX 193125 | When was the debt incurred? | |
| Columbus OH 43218-2125 | As of the date you file, the claim is: Check all that apply. | ļ |
| City State ZIP Code | ☐ Contingent | - |
| Miss to some title the grant | (Unliquidated | |
| Who incurred the debt? Check one. | Disputed | 1 |
| Debtor 1 only Debtor 2 only | | |
| Debtor 2 only Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| At least one of the debtors and another | Student loans | { |
| | Obligations arising out of a separation agreement or divorce that | |
| ☐ Check if this claim is for a community debt | you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | 1 |
| Is the claim subject to offset? | Other, Specify Creat Card | rendrimpa app. |
| No | / | |
| U Yes | • | |
| | | j |

| Debtor | 1 |
|--------|---|

Gase 18-16992 Doc 1 Filed 06/14/18 Entered 06/14/18 09:27:18 Desc Main Page 32 of 57 mber (if known)

| Deptor | 7 | |
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| | | |

Your NONPRIORITY Unsecured Claims - Continuation Page

| Tour NOW MONTY Onsecured Grands - Continuati | on Lage | |
|--|--|-----------------------|
| After listing any entries on this page, number them beginning with 4.4 | , followed by 4.5, and so forth. | Total claim |
| HO IDAPP | Last 4 digits of account number 1328 | s 16 571.1 |
| Nonpriority Creditor's Name 1765 Lake Cook Road | When was the debt incurred? | |
| Number Street Devried IL 60015-589 City State ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent | |
| Who incurred the debt? Check one. | Unliquidated Disputed | |
| Debtor 1 only Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | Student loans Obligations arising out of a separation agreement or divorce that | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| No D Yes | Other. Specify | managed by the second |
| | | |
| Great Lakes (U.S. Department) Nonpriority Creditor's Name | Last 4 digits of account number 2 <u>U13</u> | \$90,097.9 |
| PO BOX 7860 Number Street | When was the debt incurred? | |
| Madison WI 53707-7860 | As of the date you file, the claim is: Check all that apply. Contingent | |
| Who incurred the debt? Check one. | Mi Unliquidated Disputed | |
| Debtor 1 only Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | Student loans Obligations arising out of a separation agreement or divorce that | |
| Check if this claim is for a community debt | you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offset? | Other. Specify | |
| U Yes ← C | | 16000 |
| Sir Finance Corporation | Last 4 digits of account number 5994 | \$ 1900.00 |
| 424 West 31st Street | When was the debt incurred? | |
| Chicago II 60616 State ZIP Code | As of the date you file, the claim is: Check all that apply. □ Contingent | |
| Who incurred the debt? Check one, | Unliquidated Disputed | |
| Debtor 1 only Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | Student loans Obligations arising out of a separation agreement or divorce that | |
| ☐ Check if this claim is for a community debt | you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| Is the claim subject to offset? | Other. Specify Locus | - |
| 'Li Yes | | |

Debtor 1

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Partes List Others to Be Notified About a Debt That You Already Listed

| example, if a collection agency is trying to collect from you to 2, then list the collection agency here. Similarly, if you have m | ur bankruptcy, for a debt that you already listed in Parts 1 or 2. For for a debt you owe to someone else, list the original creditor in Parts 1 or lore than one creditor for any of the debts that you listed in Parts 1 or 2, list the to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. |
|--|--|
| First mark Services | On which entry in Part 1 or Part 2 did you list the original creditor? |
| PO BOX 82522 Number Street | Line 4.10 of (Check one): D Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Lincoln NE 68501-2523 | Last 4 digits of account number 2212 |
| Keynote Consulting Manus Da | On which entry in Part 1 or Part 2 did you list the original creditor? |
| 220 West Campus Drive | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured |
| Sinte 102 Arlington Heights IL 60004 | Claims Last 4 digits of account number |
| Constar Financial Services, LLC | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Number Street Suffer 100 | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Phoenix AZ 85021 State ZIP Code | Last 4 digits of account number 5377 |
| Name | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Number Street | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| City State ZIP Code | Last 4 digits of account number |
| Name | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Number Street | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| City State ZIP Code | Last 4 digits of account number |
| Name | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Number Street | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| | Part 2: Creditors with Nonpriority Unsecured Claims |
| City State ZIP Code | Last 4 digits of account number |
| Name | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Number Street | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured |
| | Claims Creditors with Nonphority Onsective |
| City State ZIP Code | Last 4 digits of account number |

Debtor 1

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Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

| Total | clair | ns |
|-------|-------|----|
| from | Part | 1 |

- 6a. Domestic support obligations
- 6b. Taxes and certain other debts you owe the government
- 6c. Claims for death or personal injury while you were intoxicated
- 6d. Other. Add all other priority unsecured claims. Write that amount here.
- 6e. Total. Add lines 6a through 6d.

Total claim

Total claim

Total claims from Part 2

- 6f. Student loans
- 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority
- 6h. Debts to pension or profit-sharing plans, and other similar debts
- 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total. Add lines 6f through 6i.

- 6g.

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| | Fill in this i | nformation to iden | itify your case: | | | | | | |
|-----|--|--|---|--|--|---|---|--|--|
| | Debtor | Hyanna | Nicole | Lee | | | | | |
| | Debtor 2 | First Name | Middle Name | L | ast Name | | | | • |
| | (Spouse If filing) | | Middle Name | | ast Name | | | | |
| | | Bankruptcy Court for t | the: Northern Distric | t of Illinois | | | | | |
| | Case number (if known) | | | | | | | | Check if this is an amended filing |
| C | official F | orm 106G | | | | | | | |
| S | chedu | ıle G: Exc | ecutory C | ontrac | ts and | Un | expired Le | ases | 12/15 |
| ad | ditional pag | es, write your nar ave any executory neck this box and fi | me and case numb contracts or unex the this form with the | er (if known). cpired leases: | , fill it out, nu ? ur other sched | mberti ules Yo | both are equally res he entries, and attac ou have nothing else t | h it to this page. O | n the top of any |
| _ | ₩ TES.F | iir iiri ail of the infor | mation below even i | f the contracts | s or leases are | listed o | on Schedule A/B: Prop | erty (Official Form | 106A/B). |
| 2. | List separ example, unexpired | toning tonicle lease | or company with one cell phone). See | whom you ha the instruction | ave the contra ns for this form | ict or le in the i | ease. Then state what instruction booklet for | at each contract or more examples of e | lease is for (for executory contracts and |
| | Person or | company with wi | nom you have the | contract or le | ease | | State what the cont | ract or lease is for | |
| 2.1 | | | | | | | | | • |
| | Name | | | ····· | | | | | |
| | Number | Street | | · | | | | | |
| | City | | State ZIP Code | | | | | | |
| 2.2 | ************************************** | ************************************** | | | | | | | |
| , | Name | | | | | | | | |
| | Number | Street | | | | | | | |
| | | | | | | | | | |
| 2.3 | City | | State ZIP Code | | | ₩ XCOMMONTO | | | |
| | Name | | | | | | | | |
| | Number | Street | | | n and the state of | | | | |
| | | | | | | | | | |
| .4 | City | | State ZIP Code | The state of the s | THE WAR HAND CONTRACT BY THE STATE OF THE CONTRACT CONTRACT | | | Conference where the second conference which the second conference where the second co | |
| | Name | | | | ···· | | | | |
| | Number | Street | ************************************** | | | | | | |
| | | | | · · · · · · · · · · · · · · · · · · · | | | | | |
| 5 | City | really of the even descriptions of the Edition of t | State ZIP Code | era de la descripción de la de | and a final state of the same | *************************************** | المعارض المعارض والمعارض والم | والوا الوسالة والمراوية والمائلة المائلة المائ | and the second s |
| | Name | · · · · · · · · · · · · · · · · · · · | | · · · · · · · · · · · · · · · · · · · | · | | | | |
| | Number | Street | | · | 11 THE THURSE A | | | | |
| | City | ······································ | | · | | | | | |

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| Stores Maria a Viscolia | | | Document | Page 36 d |
|---------------------------------|--------------------------|-----------------|----------------|-----------|
| Fill in this in | formation to identif | y your case: | | |
| Debtor 1 | Ayanna | Nicole | Lee | / |
| Daht 0 | First Name | Middle Name | Last Name | ÷ |
| Debtor 2 (Spouse, if filing) | First Name | | | |
| · · | | Middle Name | Last Name | , |
| United States B | ankruptcy Court for the: | Northern Distri | ct of Illinois | |
| Case number (if known) | | | | í |
| | | | | |

☐ Check if this is an amended filing

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| | | ither spouse as a code | otor.) |
|--|---|--|--|
| ☐ Ye | es | | |
| Within Arizor | n the last 8 years, have you lived in a community property stat na, California, Idaho, Louisiana, Nevada, New Mexico, Puedo Rico | e or territory? (Comm | unity property states and territories include |
| - | na, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico D. Go to line 3. | , Texas, Washington, a | and Wisconsin.) |
| | | | |
| | es. Did your spouse, former spouse, or legal equivalent live with yo ! No | u at the time? | |
| | | | |
| | Yes. In which community state or territory did you live? | Fill in the | name and current address of that person. |
| | Name of your spouse, former spouse, or legal equivalent | | |
| | Number Street | | |
| | City | | |
| | imn 1, list all of your codebtors. Do not include your spouse at | ZIP Code | |
| Schedi Schedi | ule D (Official Form 106D), Schedule E/F (Official Form 106E/F) ule E/F, or Schedule G to fill out Column 2. | or cosigner. Make s), or Schedule G (Offi | re you have listed the creditor on cial Form 106G). Use Schedule D, |
| Schedi Schedi | ule D (Official Form 106D), Schedule E/F (Official Form 106E/F) ule E/F, or Schedule G to fill out Column 2. | or cosigner. Make s , or Schedule G (Offi | re you have listed the creditor on cial Form 106G). Use Schedule D, |
| Schedi Schedi | ule D (Official Form 106D), Schedule E/F (Official Form 106E/F) ule E/F, or Schedule G to fill out Column 2. | r or cosigner. Make s), or <i>Schedule G</i> (Offi Co | are you have listed the creditor on cial Form 106G). Use Schedule D, furn 2: The creditor to whom you owe the de eck all schedules that apply: |
| Schedu Schedu Colum Name | ule D (Official Form 106D), Schedule E/F (Official Form 106E/F) ule E/F, or Schedule G to fill out Column 2. | Cocception of Co | ire you have listed the creditor on cial Form 106G). Use Schedule D, fumn 2: The creditor to whom you owe the de eck all schedules that apply: Schedule D, line |
| Schedi Schedi Colum | ule D (Official Form 106D), Schedule E/F (Official Form 106E/F) ule E/F, or Schedule G to fill out Column 2. | consigner. Make single, or Schedule G (Office) Co | ure you have listed the creditor on cial Form 106G). Use Schedule D, lumn 2: The creditor to whom you owe the de eck all schedules that apply: Schedule D, line Schedule E/F, line |
| Schedu Schedu Colum Name | ule D (Official Form 106D), Schedule E/F (Official Form 106E/F) ule E/F, or Schedule G to fill out Column 2. In 1: Your codebtor | consigner. Make single, or Schedule G (Office) Co | ire you have listed the creditor on cial Form 106G). Use Schedule D, fumn 2: The creditor to whom you owe the de eck all schedules that apply: Schedule D, line |
| Schedu Schedu Colum Name | ule D (Official Form 106D), Schedule E/F (Official Form 106E/F) ule E/F, or Schedule G to fill out Column 2. In 1: Your codebtor | Co Cr | ire you have listed the creditor on cial Form 106G). Use Schedule D, fumn 2: The creditor to whom you owe the de eck all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line |
| Schedu Schedu Colum Name Number | ule D (Official Form 106D), Schedule E/F (Official Form 106E/F) ule E/F, or Schedule G to fill out Column 2. an 1: Your codebtor Street | Co Ch | Ire you have listed the creditor on cial Form 106G). Use Schedule D, Schedule D, line Schedule G, line Schedule G, line Schedule D, line |
| Schedu Schedu Colum Name Number | ule D (Official Form 106D), Schedule E/F (Official Form 106E/F) ule E/F, or Schedule G to fill out Column 2. In 1: Your codebtor Street | ZIP Code | ire you have listed the creditor on cial Form 106G). Use Schedule D, fumn 2: The creditor to whom you owe the deleck all schedules that apply: Schedule D, line Schedule G, line Schedule D, line Schedule D, line |
| Schedu Schedu Colum Name Number | ule D (Official Form 106D), Schedule E/F (Official Form 106E/F) ule E/F, or Schedule G to fill out Column 2. In 1: Your codebtor Street Street | ZIP Code | Ire you have listed the creditor on cial Form 106G). Use Schedule D, Schedule D, line Schedule G, line Schedule D, line Schedule D, line |
| Schedu Schedu Schedu Colum Name Number Number | ule D (Official Form 106D), Schedule E/F (Official Form 106E/F) ule E/F, or Schedule G to fill out Column 2. In 1: Your codebtor Street Street | ZIP Code | ire you have listed the creditor on cial Form 106G). Use Schedule D, fumn 2: The creditor to whom you owe the deleck all schedules that apply: Schedule D, line Schedule G, line Schedule D, line Schedule D, line |
| Schedu Schedu Schedu Colum Name Number Number | ule D (Official Form 106D), Schedule E/F (Official Form 106E/F) ule E/F, or Schedule G to fill out Column 2. In 1: Your codebtor Street Street | ZIP Code | ire you have listed the creditor on cial Form 106G). Use Schedule D, fumn 2: The creditor to whom you owe the deleck all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule G, line |
| Schedu Sc | ule D (Official Form 106D), Schedule E/F (Official Form 106E/F) ule E/F, or Schedule G to fill out Column 2. In 1: Your codebtor Street State | ZIP Code | ire you have listed the creditor on cial Form 106G). Use Schedule D, fumn 2: The creditor to whom you owe the deleck all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule D, line Schedule D, line Schedule D, line |
| Schedu Schedu Schedu Colum Name Number City City City City City City City City | ule D (Official Form 106D), Schedule E/F (Official Form 106E/F) ule E/F, or Schedule G to fill out Column 2. In 1: Your codebtor Street Street | ZIP Code | Ire you have listed the creditor on cial Form 106G). Use Schedule D, Schedule D, Ire Creditor to whom you owe the deleck all schedules that apply: Schedule D, Ire Cohen Coh |
| Schedu Sc | ule D (Official Form 106D), Schedule E/F (Official Form 106E/F) ule E/F, or Schedule G to fill out Column 2. In 1: Your codebtor Street Street Street Street | ZIP Code | ire you have listed the creditor on cial Form 106G). Use Schedule D, fumn 2: The creditor to whom you owe the deleck all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule D, line Schedule D, line Schedule D, line |

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| Fill in this information to identi | fy your cașe: | 1924 | | | |
|--|--|--|----------------------------|-----------------------------------|---------------------|
| Debtor 1 Ayanna | Nicole | lee | | | |
| Debtor 2 | Middle Name | See Plane | | | |
| (Spouse, if filing) First Name | Middle Name | Las Nans | | | |
| United States Bankruptcy Court for the Case number | E District of | - | | | |
| (if known) | | -A-tor | i | k if this is: namended filing | |
| | | ** · · · · · · · · · · · · · · · · · · | □ A: | supplement showing postpetit | tion chapter 13 |
| Official Form 106I | | | inc | come as of the following date: | |
| Schedule I: Yo | - ur Income | · · | Miv | I / DD / YYYY | |
| Be as complete and accurate as p supplying correct information. If y f you are separated and your spo separate sheet to this form. On th Part 1: Describe Employm | use is not filing with yo e top of any additional | g jointry, untu | Your shouse is living M | ith you, include information abo | OUT VOUS SHOUSE |
| Fill in your employment information. | | Debtor 1 | | Debtor 2 or non-filing s | N HANN THE THE TANK |
| If you have more than one job attach a separate page with information about additional employers. | Employment status | Employed of employed | | Employed Not employed | SPOUS() |
| Include part-time, seasonal, or self-employed work. | | · | • | · • | |
| Occupation may include student or homemaker, if it applies. | Occupation | kimergenc | y Department | Technician | |
| | Employer's name | Northwest | em Hemmail | tospital | |
| | Employer's address | | Huron | | |
| | | Surius: Stree | | Number Street | |
| | | Chicago | IL GOGII | | |
| | How long employed th | City J | State ZIP Code | City State | ZIP Code |
| | | leie. (Oyla) | _ | - | |
| art 2: Give Details About | | | | | |
| Estimate monthly income as of t spouse unless you are separated. | | | | | ır nor-filing |
| If you or your non-filing spouse has below. If you need more space, att | e more than one employ ach a separate sheet to | yer, combine the infi this form | ormation for all employers | for that person on the lines | ; ; ; |
| List monthly gross wages, salar | Transformation (t | | For Debtor 1 | For Debtor 2 or non-filing spouse | |
| deductions). If not paid monthly, c | alculate what the monthl | y wage would be. | 2 \$33do.2 | \$ | |
| Estimate and list monthly overti | me pay. | | 3. +\$ | + \$ | |
| Calculate gross income. Add line | 2 + line 3. | | 4. \$3,366.24 | \$ | |
| And the second s | | | | 1 | |

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Debtor 1

| Firet Mana Middle | Mama I | act Nama |
|-------------------|----------|-----------------|
| Ayanna | Nicole | Pocument LC |
| ase 10-103 | 32 DUC 1 | 1 1160 00/14/10 |

Case number (if known)_

| | | For Debtor 1 | For Debtor 2 or non-filing spouse | |
|--|-------------|---|---|----------------------|
| Copy line 4 here | ≯ 4. | \$3,3iap.24 | \$ | |
| 5. List all payroll deductions: | | , | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. | s 229 56 | \$ | |
| 5b. Mandatory contributions for retirement plans | 5b. | \$ () | \$ | |
| 5c. Voluntary contributions for retirement plans | 5c. | \$ 70.66 | \$ | |
| 5d. Required repayments of retirement fund loans | 5d. | \$ () | \$ | |
| 5e. Insurance | 5e. | \$ 293.12 | \$ | |
| 5f. Domestic support obligations | 5f. | \$ () | \$ | |
| 5g. Union dues | 5g. | s 70.00 | \$ | |
| 5h. Other deductions. Specify Parking / Student Loan | 5g. 5h. | +\$371.82 | + \$ | |
| 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. | 6. | \$ 1,134.56 | \$ | |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | <u>\$2,231.68</u> | \$ | |
| B. List all other income regularly received: | | | | |
| 8a. Net income from rental property and from operating a business, profession, or farm | | | | |
| Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | <u>\$</u> | \$ | |
| 8b. Interest and dividends | 8b. | s O | \$ | |
| 8c. Family support payments that you, a non-filing spouse, or a depende regularly receive | nt | *************************************** | | |
| Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | s.494.58 | \$ | |
| 8d. Unemployment compensation | 8d. | \$ <u> </u> | \$ | |
| 8e. Social Security | 8e. | \$ <u> </u> | \$ | |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | ce 8f. | s | \$ | |
| | | . 0 | | |
| 8g. Pension or retirement income | 8g. | . ~ | \$ | |
| 8h. Other monthly income. Specify: | 8h | +\$ | +\$ | |
| a. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | 9. | \$494.58 | \$ | |
| O. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$ <u> 2796 26</u> + | \$ <u></u> | = \$ <u>2,796</u> 2 |
| State all other regular contributions to the expenses that you list in Scheol Include contributions from an unmarried partner, members of your household, y friends or relatives. | | pendents, your roomm | ates, and other | |
| Do not include any amounts already included in lines 2-10 or amounts that are r Specify: | | | i listed in <i>Schedule J.</i> 11. -1 | · <u>\$</u> |
| 2. Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain St | | | | \$2724.2 Combined |
| 13. Do you expect an increase or decrease within the year after you file this fo | orm? | | | monthly income |
| Yes. Explain: | | · · · · · · · · · · · · · · · · · · · | | |

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| Debtor 1 Debtor 2 (Spouse, if filing) Case number (If known) | NICOIE LEE Middle Name Last Name Middle Name Last Name | A supp expens | nis is: ended filing element showing pos ses as of the following | |
|--|---|---|---|--|
| Official Form 106J | | | | |
| Schedule J: You | possible. If two married people are fill | ing together, both are equally r | esponsible for suppl | 12/15 ying correct |
| information. If more space is need (if known). Answer every question | eded, attach another sheet to this form on. | n. On the top of any additional p | pages, write your nam | ne and case number |
| Part 1: Describe Your H | ousehold | | | |
| 1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a No Yes. Debtor 2 must | a separate household? file Official Form 106J-2, <i>Expenses for</i> S | Separate Household of Debtor 2. | | |
| Do you have dependents? Do not list Debtor 1 and | No Yes. Fill out this information for | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you? |
| Debtor 2. Do not state the dependents' names. | each dependent | Daughter | | No Yes |
| | | re using this form as a suppler | ment in a Chapter 13 | case to report |
| applicable date. Include expenses paid for with no such assistance and have include | on-cash government assistance if you ed it on Schedule I: Your Income (Office assessment of the company of the | know the value of cial Form 106i.) | Your expe | |
| any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes | expenses for your residence. Include | тэг полувус раўпенка вну | 4. \$ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | <u>)</u> |
| 4b. Property, homeowner's, or4c. Home maintenance, repair4d. Homeowner's association | r, and upkeep expenses | | 4b. \$4c. \$4d. \$ | <u>5</u> |

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Debtor 1

Atanna Nicole Lee
First Name Middle Name Last Name Case number (# known)_

Case number (if known)

| | | | Your expenses |
|-----|---|------|-------------------|
| 5 | Additional mortgage payments for your residence, such as home equity loans | 5. | \$ |
| | | U. | |
| 6. | | _ | s 30,00 |
| | 6a. Electricity, heat, natural gas | 6a. | \$ |
| | 6b. Water, sewer, garbage collection | 6b. | \$ 367.00 |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ <u>56 1.00</u> |
| | 6d. Other. Specify: NA | 6d. | \$ |
| 7. | Food and housekeeping supplies | 7. | \$ 300,00 |
| 8. | Childcare and children's education costs | 8. | \$ |
| 9. | Clothing, laundry, and dry cleaning | 9. | s 190.00 |
| 10. | Personal care products and services | 10. | \$ 50.00 |
| 11. | Medical and dental expenses | 11. | \$ 50.00 |
| 12. | Transportation . Include gas, maintenance, bus or train fare. Do not include car payments. | 12. | \$ 60.00 |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | s 100·00 |
| 14. | Charitable contributions and religious donations | 14. | \$ |
| 15. | Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| | 15a. Life insurance | 15a. | <u> 57.00</u> |
| | 15b. Health insurance | 15b. | \$ |
| | 15c. Vehicle insurance | 15c. | s 105.5A |
| | 15d. Other insurance. Specify: NH | 15d. | \$ 0 |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: State tax debt Payment Plan | 16. | <u>\$ 100.00</u> |
| 17. | Installment or lease payments: | | 6- |
| | 17a. Car payments for Vehicle 1 | 17a. | <u>\$</u> |
| | 17b. Car payments for Vehicle 2 | 17b. | <u>\$</u> |
| | 17c. Other. Specify: NIA | 17c. | s <u> </u> |
| | 17d. Other, Specify: N LA | 17d. | \$ |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | s |
| 19. | Other payments you make to support others who do not live with you. | | |
| | Specify: N/A | 19. | \$ |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom | ie. | _ |
| | 20a. Mortgages on other property | 20a. | <u>\$</u> |
| | 20b. Real estate taxes | 20b. | sO |
| | 20c. Property, homeowner's, or renter's insurance | 20c. | \$ |
| | 20d. Maintenance, repair, and upkeep expenses | 20d. | \$ |
| | 20e. Homeowner's association or condominium dues | 20e. | \$ |

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Debtor 1

| Ayanna | Nicole | Lee | |
|-------------------|--------|---------|--|
| Circl Name Middle | Mana | at Name | |

Case number (if known)

| 21. | Other Specify: Residential | Parking | /4011cloan |
|-----|----------------------------|---------|------------|
| | | , 77 | • |

21. +8 243,84

- 22. Calculate your monthly expenses.
 - 22a. Add lines 4 through 21.
 - 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2
 - 22c. Add line 22a and 22b. The result is your monthly expenses.

22a. \$2,953.36 22b. \$0 22c. \$2,953.36

- 23. Calculate your monthly net income.
 - 23a. Copy line 12 (your combined monthly income) from Schedule I.
 - 23b. Copy your monthly expenses from line 22c above.
 - 23c. Subtract your monthly expenses from your monthly income.

 The result is your *monthly net income*.

23a. \$ 2726.26 23b. -\$ 2,953.36

23c

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

| Explain here: |
|---------------|
| |

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| Document 1 age 42 of 37 | |
|---|--|
| Fill in this information to identify your case: | |
| Debtor 1 Ayanna Nicole Lee | |
| First Name Middle Name Last Name Debtor 2 | |
| (Spouse, if filing) First Name Middle Name Last Name | |
| United States Bankruptcy Court for the: Northern District of Illinois | _ |
| Case number (if known) | Check if this is ar amended filing |
| Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Inf Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for information. Fill out all of your schedules first; then complete the information on this form. If you are filing amend your original forms, you must fill out a new Summary and check the box at the top of this page. | or supplying correct |
| Part 1: Summarize Your Assets | Your assets Value of what you own |
| Schedule A/B: Property (Official Form 106A/B) | value of what you own |
| 1a. Copy line 55, Total real estate, from Schedule A/B | \$ |
| 1b. Copy line 62, Total personal property, from Schedule A/B | s <u>46,171.82</u> |
| 1c. Copy line 63, Total of all property on Schedule A/B | ··· \$44,171.82 |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | <u>\$</u> |
| | |
| Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | s 2,444.00 |

Part 3: Summarize Your Income and Expenses

3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F

s 2726,26

Your total liabilities

· 2, 953.36

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Debtor 1

Case number (if known)_

| | Answer These Questions for Administrative and Statistical Record | S |
|----|--|--|
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? | |
| | No. You have nothing to report on this part of the form. Check this box and submit this Yes | form to the court with your other schedules. |
| 7. | What kind of debt do you have? | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by are family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose. | n individual primarily for a personal, oses. 28 U.S.C. § 159. |
| | Your debts are not primarily consumer debts. You have nothing to report on this parthis form to the court with your other schedules. | rt of the form. Check this box and submit |
| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly in Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | s 3,860.89 |
| 9. | Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: | |
| | | Total claim |
| | From Part 4 on Schedule E/F, copy the following: | |
| | 9a. Domestic support obligations (Copy line 6a.) | \$O |
| | 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | <u>\$2,444.00</u> |
| | 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ <u>_</u> |
| | 9d. Student loans. (Copy line 6f.) | ,105,252.84 |
| | 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ |
| | 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | + \$ |
| | 9g. Total. Add lines 9a through 9f. | s 107,696.84 |

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| Fill in this information to identify your case: | | | |
|---|--|--|---|
| Debtor 1 Alame Nicole 1 | Last Name | | |
| Debtor 2 (Spouse, if filing) First Name Middle Name | Last Name | | |
| United States Bankruptcy Court for the: Northern Distri | ct of Illinois | | |
| Case number(If known) | ···· | | |
| | | 17.00 A | Check if this is a amended filing |
| | | | , |
| Official Form 107 | | | |
| tatement of Financial Aff | airs for Indi | viduals Filing for Ba | nkruptev oan |
| as complete and accurate as possible. If two n | narried neonle are fill- | | |
| formation. If more space is needed, attach a se imber (if known). Answer every question. | parate sheet to this fo | rm. On the top of any additional page | es, write your name and case |
| art 1: Give Details About Your Marital | | | |
| art 1: Give Details About Your Marital | Status and Where Y | ou Lived Before | |
| . What is your current marital status? | | | |
| ☐ Married | | | |
| Not married | | | |
| During the last 2 years, house you be at | oro other them are | | |
| Puring the last 3 years. Have you hypg anywh | | and the amount | |
| □ No | | | |
| ☐ No ☐ Yes. List all of the places you lived in the last | | | |
| □ No | | | Dates Debtor 2 lived there |
| No Yes. List all of the places you lived in the last Debtor 1: | 3 years. Do not include Dates Debtor 1 lived there | e where you live now. | lived there |
| No Yes. List all of the places you lived in the last Debtor 1: | 3 years. Do not include Dates Debtor 1 lived there | e where you live now. Debtor 2: | lived there Same as Debtor 1 |
| Yes. List all of the places you fived in the last | 3 years. Do not include Dates Debtor 1 lived there | e where you live now. Debtor 2: | lived there |
| No Yes. List all of the places you lived in the last Debtor 1: | Dates Debtor 1 lived there | Debtor 2: Same as Debtor 1 | lived there Same as Debtor 1 From |
| No Yes. List all of the places you lived in the last Debtor 1: | Dates Debtor 1 lived there | Debtor 2: Same as Debtor 1 Number Street | lived there Same as Debtor 1 From To |
| No Yes. List all of the places you lived in the last Debtor 1: 1133 S. Richmond Stra Number Street Chicago IL Loco. | Dates Debtor 1 lived there | Debtor 2: Same as Debtor 1 Number Street City State 2 | Iived there Same as Debtor 1 From To IP Code |
| No Yes. List all of the places you lived in the last Debtor 1: 1133 S. Richmond Street Chicago IL Local City State ZIP Code | Dates Debtor 1 lived there 224 From 513 To 1116 | Debtor 2: Same as Debtor 1 Number Street City State 2 | Iived there Same as Debtor 1 From To IP Code Same as Debtor 1 |
| No Yes. List all of the places you lived in the last Debtor 1: 1133 S. Richmond Stra Number Street Chicago IL Loco. | Dates Debtor 1 lived there | Debtor 2: Same as Debtor 1 Number Street City State 2 | Ilived there Same as Debtor 1 From To IP Code Same as Debtor 1 From |
| No Yes. List all of the places you lived in the last Debtor 1: 1133 S. Richmond Street Chicago IL Local City State ZIP Code | Dates Debtor 1 lived there 22 From 5113 To 116 | Debtor 2: Same as Debtor 1 Number Street City State Z Same as Debtor 1 | Ilived there Same as Debtor 1 From To IP Code Same as Debtor 1 |
| No Yes. List all of the places you lived in the last Debtor 1: 1133 S. Richmond Street Chicago IL Local City State ZIP Code | Dates Debtor 1 lived there 22 From 5113 To 116 | Debtor 2: Same as Debtor 1 Number Street City State Z Number Street | Ilived there Same as Debtor 1 From To IP Code Same as Debtor 1 From To |
| No Yes. List all of the places you lived in the last Debtor 1: 1133 S. Richmond Stranger Number Street Chicago JL Lodger City State ZIP Code Within the last 8 years, did you ever live with a | Dates Debtor 1 lived there 22 From 513 To 1116 From To | Debtor 2: Same as Debtor 1 Number Street City State Z Number Street City State Z | Ilived there Same as Debtor 1 From To IP Code Same as Debtor 1 From To ZIP Code |
| No Yes. List all of the places you lived in the last Debtor 1: 1133 S. Richmond Street Chicago TL Loco City State ZIP Code Number Street City State ZIP Code Within the last 8 years, did you ever live with a states and territories include Arizona, California, locality No | Dates Debtor 1 lived there 22 From 5113 To 116 From To spouse or legal equiviaho, Louisiana, Nevada | Debtor 2: Same as Debtor 1 Number Street City State Z Same as Debtor 1 Number Street City State Z Number Street | Ilived there Same as Debtor 1 From To IP Code Same as Debtor 1 From To ZIP Code |
| No Yes. List all of the places you lived in the last Debtor 1: 1133 S. Richmond Street Chicago IL Local City State ZIP Code Number Street City State ZIP Code Within the last 8 years, did you ever live with a states and territories include Arizona, California, Ic. | Dates Debtor 1 lived there 22 From 5113 To 116 From To spouse or legal equiviaho, Louisiana, Nevada | Debtor 2: Same as Debtor 1 Number Street City State Z Same as Debtor 1 Number Street City State Z Number Street | Ilived there Same as Debtor 1 From To IP Code Same as Debtor 1 From To ZIP Code |

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| First Name Middle Name La | ste Lee | Case | number (if known) | |
|---|--|--|---|--|
| Did you have any income from employme Fill in the total amount of income you receiv If you are filing a joint case and you have in No Yes. Fill in the details. | cu iiviii ali loos and ali blis | inesses including pad- | timo ontinition | lendar years? |
| | Debtor 1 | | Debtor 2 | |
| | Sources of income Check all that apply. | Gross Income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | Wages, commissions, bonuses, tips Operating a business | \$ | Wages, commissions, bonuses, tips Operating a business | \$ |
| For last calendar year: (January 1 to December 31, | Wages, commissions, bonuses, tips Operating a business | \$ | Wages, commissions, bonuses, tips Operating a business | \$ |
| For the calendar year before that: (January 1 to December 31, | ☐ Wages, commissions, bonuses, tips | \$ | Wages, commissions, bonuses, tips Operating a business | \$ |
| Did you receive any other income during the include income regardless of whether that include unemployment, and other public benefit navor | ome is taxable. Examples | of other income are allow | nony; child support; Social S | Security, |
| unemployment, and other public benefit paym gambling and lottery winnings. If you are filing List each source and the gross income from e | come is taxable. Examples a tents; pensions; rental inco a joint case and you have | of other income are alim me; interest; dividends; income that you receive | money collected from laws ed together, list it only once | |
| unemployment, and other public benefit paym gambling and lottery winnings. If you are filing List each source and the gross income from e | come is taxable. Examples sents; pensions; rental income a joint case and you have each source separately. Do | of other income are alim me; interest; dividends; income that you receive | money collected from laws ed together, list it only once you listed in line 4. | |
| unemployment, and other public benefit paym gambling and lottery winnings. If you are filing List each source and the gross income from e | come is taxable. Examples sents; pensions; rental income a joint case and you have each source separately. Do Debtor 1 Sources of income Describe below. | of other income are alim me; interest; dividends; income that you receive | money collected from laws ed together, list it only once | |
| unemployment, and other public benefit paym gambling and lottery winnings. If you are filing List each source and the gross income from e | come is taxable. Examples sents; pensions; rental income is a joint case and you have each source separately. Do Debtor 1 Sources of income Describe below. | of other income are alimme; interest; dividends; income that you receive not include income that Gross income from each source (before deductions and exclusions) | money collected from laws ed together, list it only once you listed in line 4. Debtor 2 Sources of income | uits; royalties; and under Debtor 1. Gross income from each source (before deductions and |
| unemployment, and other public benefit paym gambling and lottery winnings. If you are filing List each source and the gross income from e | come is taxable. Examples sents; pensions; rental income a joint case and you have each source separately. Do Debtor 1 Sources of income Describe below. | of other income are alimme; interest; dividends; income that you receive not include income that Gross income from each source (before deductions and exclusions) | money collected from laws ed together, list it only once you listed in line 4. Debtor 2 Sources of income Describe below. | uits; royalties; and under Debtor 1. Gross income from each source (before deductions and |
| unemployment, and other public benefit paym gambling and lottery winnings. If you are filing List each source and the gross income from e | come is taxable. Examples sents; pensions; rental income is a joint case and you have each source separately. Do Debtor 1 Sources of income Describe below. \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | of other income are alimme; interest; dividends; income that you receive not include income that Gross income from each source (before deductions and exclusions) | money collected from laws ed together, list it only once you listed in line 4. Debtor 2 Sources of income Describe below. | uits; royalties; and under Debtor 1. Gross income from each source (before deductions and exclusions) |
| unemployment, and other public benefit paym gambling and lottery winnings. If you are filing List each source and the gross income from e No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, | come is taxable. Examples sents; pensions; rental income is a joint case and you have each source separately. Do Debtor 1 Sources of income Describe below. \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | of other income are alimme; interest; dividends; income that you receive not include income that Gross income from each source (before deductions and exclusions) | money collected from laws ed together, list it only once you listed in line 4. Debtor 2 Sources of Income Describe below. | uits; royalties; and under Debtor 1. Gross income from each source (before deductions and exclusions) |

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Debtor 1

| ۸ | | | Y |
|------------|-------------|-----------|----------|
| MY | anna | Nuole | 60 |
| First Name | Middle Name | Last Name | |

Case number (# known)

| | ist Certain Payments You Made Bef | | a 101 Dilliniapicy | | |
|---------|--|---------------------|----------------------------|---|---|
| e eithe | r Debtor 1's or Debtor 2's debts primarily | consumer del | bts? | | |
| No. i | Neither Debtor 1 nor Debtor 2 has primari "incurred by an individual primarily for a pers | ly consumer d | ebts. Consumer debts a | are defined in 11 U.S.C. § 1 | 01(8) as |
| | During the 90 days before you filed for bankr | | | of \$6.425* or marc? | |
| ١. | No. Go to line 7. | | pay any oroditor a total o | n wortes of more: | |
| | Yes. List below each creditor to whom yo total amount you paid that creditor. I child support and alimony. Also, do | Jo not include i | navments for domestic s | as dous seniteailde bonaus | |
| * | Subject to adjustment on 4/01/19 and every | 3 years after t | hat for cases filed on or | after the date of adjustment | |
| Yes. I | Debtor 1 or Debtor 2 or both have primarily | v consumer d | ebts. | | |
| | During the 90 days before you filed for bankru | | | f \$600 or more? | |
| ~ | No. Go to line 7. | | | , | |
| C | Yes. List below each creditor to whom you creditor. Do not include payments for alimony. Also, do not include payments | r domestic suo: | oort obligations, such as | child support and | |
| | | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
| | Creditor's Name | | \$ | \$ | ☐ Mortgage |
| | Ground o Hamb | | | | ☐ Car |
| | Number Street | | | | Credit card |
| | | | | | Loan repayment |
| | | | | | |
| | 4- 1-19-19-19-19-19-19-19-19-19-19-19-19-19 | | | | |
| | City State ZIP Code | | | | Suppliers or vendo |
| | City State ZIP Code | | | | ☐ Suppliers or vendo |
| | City State ZIP Code Creditor's Name | | \$ | \$ | Suppliers or vendo |
| | | | \$ | _ \$ | Suppliers or vendo |
| | | | \$ | \$ | Suppliers or vendo Other Mortgage |
| | Creditor's Name | | \$ | \$ | Suppliers or vendo Other Other Mortgage Car Credit card |
| | Creditor's Name | | \$ | \$\$ | Suppliers or vendo Other Mortgage Car Credit card Loan repayment |
| | Creditor's Name | | \$ | \$\$ | Suppliers or vendo Other Mortgage Car Credit card Loan repayment |
| | Creditor's Name Number Street | | \$ | \$\$ | Suppliers or vendor Other Other Car Credit card Loan repayment Suppliers or vendor |
| | Creditor's Name Number Street | | \$ | _ \$ | Suppliers or vendor Other Mortgage Car Credit card Loan repayment Suppliers or vendor Other |
| | Creditor's Name Number Street | | \$\$ | \$\$\$ | Suppliers or vendor Other Mortgage Car Credit card Loan repayment Suppliers or vendor Other Other |
| | Creditor's Name Number Street City State ZiP Code Creditor's Name | | \$\$ | \$\$ | Suppliers or vendor Other Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car |
| | Creditor's Name Number Street City State ZiP Code | | \$\$ | \$\$ | Suppliers or vendor Other Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card |
| | Creditor's Name Number Street City State ZiP Code Creditor's Name | | \$\$ | \$\$ | Suppliers or vendor Other Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card Loan repayment |
| | Creditor's Name Number Street City State ZiP Code Creditor's Name | | \$\$ | _ \$ | Suppliers or vendo Other Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage Car Credit card |

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| iders include your relati porations of which you | are an officer, director, per business you operate as a alimony. | relatives of any son in control, c | general partners; per owner of 20% or | partnerships of whi | who was an Insider? ch you are a general partner; g securities; and any managing or domestic support obligations, |
|--|--|--|---------------------------------------|----------------------|---|
| | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| insider's Name | | | \$ | \$ | |
| Number Street | | - | | | |
| City | State ZIP Code | _ | | | |
| | | The state of the s | \$ | \$ | |
| | | | | | |
| Insider's Name | | | | | |
| Insider's Name Number Street | | | | | |
| | State ZIP Code | | | | |
| Number Street City hin 1 year before you finsider? ude payments on debts . | | | ayments or trans Total amount | | |
| Number Street City hin 1 year before you finsider? ude payments on debts . | filed for bankruptcy, did y guaranteed or cosigned by | y an insider. Dates of | Total amount | Amount you still owe | |
| Number Street City nin 1 year before you f nsider? ude payments on debts | filed for bankruptcy, did y guaranteed or cosigned by | y an insider. Dates of | Total amount | Amount you still | Reason for this payment |
| Number Street City nin 1 year before you finsider? ude payments on debts No Yes. List all payments ti | filed for bankruptcy, did y guaranteed or cosigned by | y an insider. Dates of | Total amount | Amount you still owe | Reason for this payment |
| Number Street City nin 1 year before you f insider? ude payments on debts No Yes. List all payments ti | filed for bankruptcy, did y guaranteed or cosigned by | y an insider. Dates of | Total amount | Amount you still owe | Reason for this payment |
| Number Street City nin 1 year before you finsider? ude payments on debts No Yes. List all payments to Insider's Name | filed for bankruptcy, did y guaranteed or cosigned by that benefited an insider. | y an insider. Dates of | Total amount paid | Amount you still owe | Reason for this payment |
| Number Street City nin 1 year before you finsider? ude payments on debts No Yes. List all payments to Insider's Name | filed for bankruptcy, did y guaranteed or cosigned by that benefited an insider. | y an insider. Dates of | Total amount | Amount you still owe | Reason for this payment |

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| Ay | anna Nicore | Lee | • | Case number (if known) | |
|---------|--------------------------|-----|---|---|--|
| Fire 18 | me Middle Name Last Name | | | , | |

| contract disputes. | | wsult, court action, or admin vorces, collection sults, patern | | |
|--|--|--|----------|---|
| No | | | | |
| Yes. Fill in the details. | | | | |
| | Nature of the case | Court or agency | | Status of the case |
| 1 | and date of the 1 to 1 t | | • | |
| Case title | | | | Pending |
| Case title | | Court Name | | On appeal |
| | | Number Claret | | Concluded Concluded |
| A A | | Number Street | | Concluded |
| Case number | | City State | ZIP Code | |
| | | CRY | 21F C008 | kiji. Yilahailikka Palasanghaa sikha kai Palistan a maanara, kaaraka marana soosa kabasan o |
| | | | | |
| Case title | | Court Name | ······ | — Pending |
| The property of the control of the c | | # | | On appeal |
| | | Number Street | | Concluded |
| Case number | | | | |
| | | City State | ZIP Code | |
| No. Go to line 11. Yes. Fill in the information below. | Quandle Marian | | P. d. | |
| | Describe the property | | Date | Value of the property |
| | Describe the property | | Date | Value of the property |
| | Describe the property | | Date | Value of the property |
| es. Fill in the information below. | Describe the property Explain what happene | | Date | Value of the property |
| es. Fill in the information below. Creditor's Name | Explain what happen | ed | Date | Value of the property |
| es. Fill in the information below. Creditor's Name | Explain what happen | ed epossessed. | Date | Value of the property |
| es. Fill in the information below. Creditor's Name | Explain what happened Property was re | ed epossessed. preclosed. | Date | Value of the property |
| es. Fill in the information below. Creditor's Name | Explain what happend Property was for Property was go | ed epossessed. preclosed. | Date | Value of the property |
| es. Fill in the information below. Creditor's Name Number Street | Explain what happend Property was for Property was go | ed epossessed. preclosed. arnished. ttached, seized, or levied. | Date | \$ |
| Creditor's Name Number Street | Explain what happend Property was re Property was for Property was go | ed epossessed. preclosed. arnished. ttached, seized, or levied. | | \$ |
| Creditor's Name Number Street | Explain what happend Property was re Property was for Property was go | ed epossessed. preclosed. arnished. ttached, seized, or levied. | | Value of the property S Value of the property |
| Creditor's Name Number Street | Explain what happend Property was re Property was for Property was go | ed epossessed. preclosed. arnished. ttached, seized, or levied. | | \$ |
| Creditor's Name Number Street City State ZIP Cod | Explain what happend Property was re Property was for Property was go | ed epossessed. preclosed. arnished. ttached, seized, or levied. | | \$ |
| Creditor's Name Number Street City State ZIP Cod | Explain what happend Property was re Property was for Property was go Property was all Describe the property | ed epossessed. preclosed. amished. ttached, seized, or levied. | | \$ |
| Creditor's Name Number Street City State ZIP Cod | Explain what happend Property was re Property was for Property was go | ed epossessed. preclosed. amished. ttached, seized, or levied. | | \$ |
| Creditor's Name Number Street City State ZIP Cod | Explain what happend Property was re Property was for Property was go Property was all Describe the property | ed epossessed. preclosed. amished. ttached, seized, or levied. | | \$ |
| Creditor's Name Number Street City State ZIP Cod | Explain what happend Property was re Property was grant Property was all Property was all Property was all Property was re Property was re Property was re | ed possessed. preclosed. amished. ttached, seized, or levied. ded possessed. preclosed. | | \$ |
| Creditor's Name Number Street City State ZIP Cod | Explain what happend Property was re Property was go Property was all Describe the property Explain what happend Property was re Property was re | ed possessed. preclosed. amished. ttached, seized, or levied. ded possessed. preclosed. | | |

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| thin 90 days before you filed for i | bankruptcy, did any creditor, including a bank or financia | al institution, set off any amounts from your |
|--|--|--|
| counts or refuse to make a paym | ent because you owed a debt? | |
| No Yes. Fill in the details. | • | |
| res. Fin in the details. | | |
| | Describe the action the creditor took | Date action Amount |
| Creditor's Name | | was taken |
| | | |
| Number Street | | <u> </u> |
| | | And the second s |
| | | |
| Other Time | | |
| City State ZIP | Code Last 4 digits of account number: XXXX | |
| 5 t = 4 6 - F | | |
| hin 1 year before you filed for ba | nkruptcy, was any of your property in the possession of | an assignee for the benefit of |
| | r, a custodian, or another official? | , |
| No Yes | | |
| res | | |
| List Certain Gifts and Co | ntributions | |
| | | |
| | | |
| Yes. Fill in the details for each gift. Gifts with a total value of more than | | Dates you gave Value |
| Yes. Fill in the details for each gift. | | Dates you gave Value the gifts |
| Yes. Fill in the details for each gift. Gifts with a total value of more than | \$600 Describe the gifts | |
| Yes. Fill in the details for each gift. Gifts with a total value of more than per person | \$600 Describe the gifts | |
| Yes. Fill in the details for each gift. Gifts with a total value of more than per person | \$600 Describe the gifts | |
| Yes. Fill in the details for each gift. Gifts with a total value of more than per person | \$600 Describe the gifts | |
| Yes. Fill in the details for each gift. Gifts with a total value of more than per person | \$600 Describe the gifts | |
| Yes. Fill in the details for each gift. Gifts with a total value of more than per person Person to Whom You Gave the Gift | \$600 Describe the gifts | |
| Yes. Fill in the details for each gift. Gifts with a total value of more than per person Person to Whom You Gave the Gift | \$600 Describe the gifts | |
| Yes. Fill in the details for each gift. Gifts with a total value of more than per person Person to Whom You Gave the Gift | \$600 Describe the gifts | |
| Yes. Fill in the details for each gift. Gifts with a total value of more than per person Person to Whom You Gave the Gift Number Street | \$600 Describe the gifts | |
| Yes. Fill in the details for each gift. Gifts with a total value of more than per person Person to Whom You Gave the Gift Number Street | \$600 Describe the gifts | |
| Yes. Fill in the details for each gift. Gifts with a total value of more than per person Person to Whom You Gave the Gift Sumber Street Person's relationship to you Gifts with a total value of more than \$665. | \$600 Describe the gifts Code | the gifts \$\$ \$ Dates you gave Value |
| Yes. Fill in the details for each gift. Gifts with a total value of more than per person Person to Whom You Gave the Gift Sumber Street Person's relationship to you Gifts with a total value of more than \$665. | \$600 Describe the gifts Code | \$\$ |
| Yes. Fill in the details for each gift. Gifts with a total value of more than per person Person to Whom You Gave the Gift Sumber Street Person's relationship to you Gifts with a total value of more than \$665. | \$600 Describe the gifts Code | \$S |
| Yes. Fill in the details for each gift. Gifts with a total value of more than per person Person to Whom You Gave the Gift State ZIP Correson's relationship to you Gifts with a total value of more than \$100 person | \$600 Describe the gifts Code | \$S |
| Yes. Fill in the details for each gift. Gifts with a total value of more than per person Person to Whom You Gave the Gift State ZIP Correson's relationship to you Gifts with a total value of more than \$100 person | \$600 Describe the gifts Code | the gifts \$\$ \$ Dates you gave Value |
| Yes. Fill in the details for each gift. Gifts with a total value of more than per person Person to Whom You Gave the Gift Number Street Sity State ZIP C Person's relationship to you Gifts with a total value of more than \$100 per person | \$600 Describe the gifts Code | \$S |
| Yes. Fill in the details for each gift. Gifts with a total value of more than per person Person to Whom You Gave the Gift Number Street Sity State ZIP C Person's relationship to you Gifts with a total value of more than \$100 per person | \$600 Describe the gifts Code | the gifts \$ \$ Dates you gave Value |
| Yes. Fill in the details for each gift. Gifts with a total value of more than per person Person to Whom You Gave the Gift State ZIP Corresponds with a total value of more than \$100 per person Person to Whom You Gave the Gift Person to Whom You Gave the Gift | \$600 Describe the gifts Code | \$S |
| Yes. Fill in the details for each gift. Gifts with a total value of more than per person Person to Whom You Gave the Gift Number Street City State ZIP C Person's relationship to you Gifts with a total value of more than \$100 per person Person to Whom You Gave the Gift | \$600 Describe the gifts Code | the gifts \$ \$ Dates you gave Value |
| Person to Whorn You Gave the Gift Number Street City State ZiP C Person's relationship to you Gifts with a total value of more than \$100 per person Person to Whom You Gave the Gift Number Street | \$600 Describe the gifts Code Describe the gifts | \$S |
| Yes. Fill in the details for each gift. Gifts with a total value of more than per person Person to Whom You Gave the Gift Number Street City State ZiP C Person's relationship to you Gifts with a total value of more than \$100 per person Person to Whom You Gave the Gift | \$600 Describe the gifts Code Describe the gifts | the gifts \$ \$ Dates you gave Value |

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| Debtor | 4 | |
|--------|---|--|

| Ayar | Mα | N | whe | Le | e |
|------------|----------|-----|----------|------|---|
| First Name | Middle N | ame | Last Nam | ie . | |

| Case number | (if known) |
|-------------|------------|
| | |

| No | | | |
|---|--|--|------------------------------|
| Yes. Fill in the details for each gift or c | ontribution. | | |
| Gifts or contributions to charities that total more than \$600 | Describe what you contributed | Date you contributed | Value |
| | | Ī | |
| | | | \$ |
| Charity's Name | 4 4 | | |
| | | | \$ |
| | | | |
| Number Street | | | |
| | | | |
| City State ZIP Code | | | |
| | | | |
| List Certain Losses | | | |
| | | | |
| | uptcy or since you filed for bankruptcy, did you lose anything | because of theft, | fire, other |
| aster, or gambling? | | | |
| No | • | | |
| Yes. Fill in the details. | | | |
| Describe the property you lost and how the loss occurred | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance | Date of your loss | Value of property lost |
| | claims on line 33 of Schedule A/B: Property. | | |
| | Gains on the 33 of Scredule No. Property. | [| |
| | calms on the 33 of Schedule Ab. Property. | | \$ |
| | calms on the 33 of Schedule Abs. Property. | | \$ |
| | | | \$ |
| <u> </u> | ınsfers | | \$ |
| nin 1 year before you filed for bankru | nnsfers aptcy, did you or anyone else acting on your behalf pay or tran | sfer any property | \$to anyone |
| nin 1 year before you filed for bankru consulted about seeking bankruptc | ınsfers | | \$to anyone |
| nin 1 year before you filed for bankru consulted about seeking bankruptcude any attorneys, bankruptcy petition | insfers uptcy, did you or anyone else acting on your behalf pay or tran | | to anyone |
| nin 1 year before you filed for bankru consulted about seeking bankruptc | insfers uptcy, did you or anyone else acting on your behalf pay or tran | | to anyone |
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| nin 1 year before you filed for bankru consulted about seeking bankruptc ude any attorneys, bankruptcy petition of No Yes. Fill in the details. | insfers uptcy, did you or anyone else acting on your behalf pay or tran | ur bankruptcy, Date payment or transfer was | to anyone Amount of payment |
| nin 1 year before you filed for bankru consulted about seeking bankruptcude any attorneys, bankruptcy petition | insfers sptcy, did you or anyone else acting on your behalf pay or transy or preparing a bankruptcy petition? preparers, or credit counseling agencies for services required in yo | ur bankruptcy. Date payment or | |
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| Ayanna Nicole Lee | Case number (# known) |
|----------------------------------|-----------------------|
| First Name Middle Name Last Name | |

| | Description and value of any property | transferred | Date payment or transfer was made | Amount of payment |
|--|---|--|--|------------------------|
| Person Who Was Paid | - | | | |
| | _ | | | \$ |
| Number Street | | | 1 to | \$ |
| | <u></u> | | ************************************** | ¥ |
| City State ZIP Code | - | | an comment of the com | |
| | | | t tiple division materials | |
| Email or website address | | | | |
| Person Who Made the Payment, if Not You | | | | |
| not include any payment or transfer that y No Yes. Fill in the details. | you listed on line 16. | | | |
| | Description and value of any property | transferred | Date payment or transfer was | Amount of payme |
| Person Who Was Paid | | | made | |
| Number Street | ~ | | | \$ |
| WWW. | | | | • |
| | | | 1 | 3 . |
| City State ZIP Code hin 2 years before you filed for bankru | | transfer any proper | ty to anyone, other tha | an property |
| hin 2 years before you filed for bankrup asferred in the ordinary course of your ude both outright transfers and transfers r not include gifts and transfers that you ha No | business or financial affairs? made as security (such as the granting of | | | |
| hin 2 years before you filed for bankrup asferred in the ordinary course of your ude both outright transfers and transfers r not include gifts and transfers that you ha | business or financial affairs? made as security (such as the granting of the statement) we already listed on this statement. | | | |
| hin 2 years before you filed for bankrup asferred in the ordinary course of your ude both outright transfers and transfers r not include gifts and transfers that you ha No | business or financial affairs? made as security (such as the granting of | of a security interest o | or mortgage on your pro | perty). |
| hin 2 years before you filed for bankrup asferred in the ordinary course of your ude both outright transfers and transfers r not include gifts and transfers that you ha No | business or financial affairs? made as security (such as the granting of the already listed on this statement. Description and value of property | of a security interest | or mortgage on your pro | perty). Date transfer |
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| hin 2 years before you filed for bankrup isferred in the ordinary course of your ude both outright transfers and transfers renot include gifts and transfers that you hank No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code | business or financial affairs? made as security (such as the granting of the already listed on this statement. Description and value of property | of a security interest | or mortgage on your pro | perty). Date transfer |
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| ription and value of the prop | perty transferred | | Date trans was made |
|-------------------------------|--|--|--|
| | | | was made |
| | | | |
| er financial accounts; cer | or instruments held in | your name, or for your | - |
| 4 digits of account number | Type of account or instrument | Date account was closed, sold, moved, or transferred | Last balance closing or tra |
| | ☐ Checking | | |
| X | Cuscaing | | \$ |
| X | Savings | | \$ |
| X | ☐ Savings ☐ Money market | | \$ |
| X | ☐ Savings ☐ Money market ☐ Brokerage | | \$ |
| X | ☐ Savings ☐ Money market | | \$ |
| x | ☐ Savings ☐ Money market ☐ Brokerage | | \$ |
| | Savings Money market Brokerage Other | | \$\$ |
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| | Savings Money market Brokerage Other Checking Savings | | \$\$ |
| , | er financial accounts; cer | er financial accounts; certificates of deposit; shassociations, and other financial institutions. 4 digits of account number Type of account or | 4 digits of account number Туре of account or Date account was instrument closed, sold, moved, |

City

ZIP Code

Number Street

State

City

State

ZIP Code

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| Alanv | na Nico | le Lee | Case number (# known) | |
|------------|-------------|-----------|-----------------------|--|
| First Name | Middle Name | Last Name | | |

| Name of Storage Facility | Who else has or had access to it? | Describe the contents | Do you st have it? |
|--|--|--|--|
| Name of Storage Facility | | | 1 |
| Name of Storage Facility | | | ☐ No |
| | Name | | Yes |
| Number Street | Number Street | Market Printed | ************************************** |
| All the same of th | CityState ZIP Code | Name and the first control and | |
| City State ZIP Code | $\frac{1}{2} \left(\frac{1}{2} \left$ | | Meridia physioteris annu america annu annu annu annu annu annu annu an |
| Identify Property You Ho | id or Control for Someone Else | | |
| | | | |
| | at someone else owns? include any p | roperty you borrowed from, are storing for, | ı |
| hold in trust for someone. | | | |
| /No Yes. Fill in the details. | | | |
| tes. Fill in the details. | | | |
| | Where is the property? | Describe the property | Value |
| | | | |
| Owner's Name | _ | | s |
| | | | T |
| Number Street | Number Street | | |
| | | | |
| *************************************** | nome | | |
| City State ZiP Code | City State ZIP | Code | |
| ony State Broote | • | han ad 1/1441 and 1/14 | |
| Give Details About Enviro | onmental information | | |
| | | | |
| e purpose of Part 10, the following d | efinitions apply: | | |
| vironmental law means any federal, s | state, or local statute or regulation co | ncerning pollution, contamination, releases | s of |
| | | rface water, groundwater, or other medium | ا, |
| luding statutes or regulations contro | olling the cleanup of these substance | s, wastes, or material. | |
| means any location, facility, or pro | perty as defined under any environme | ental law, whether you now own, operate, o | r |
| ize it or used to own, operate, or util | | man law, middler you now own, operate, o | • |
| · | • • | | |
| - | | rdous waste, hazardous substance, toxic | |
| ostance, hazardous material, políuta | nt, contaminant, or similar term. | | |
| all notices, releases, and proceeding | igs that you know about, regardless o | of when they occurred. | |
| | | | |
| any governmental unit notified you | that you may be liable or potentially if | iable under or in violation of an environmer | ıtal law? |
| | | | |
| ᠬ | | | |
| Yes. Fill in the details. | • | | |
| | Governmental unit | Environmental law if you know it | Data af water |
| | Governmental time | Environmental law, if you know it | Date of notice |
| | | | |
| | 1 | | |
| | | | |
| Name of site | Governmental unit | | |
| | | | |
| Name of site | Governmental unit | | |

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| Ayanr | na Nico | le 1 | Lee | Case nu |
|------------|-------------|-----------|-----|---------|
| First Name | Middle Name | Last Name | | |

|) No | | | |
|--|---|--|--|
| Yes. Fill In the details. | 6 | e | Data of wette |
| | Governmental unit | Environmental law, if you know it | Date of notice |
| Name of site | Governmental unit | | |
| name of site | Governmental unit | | |
| Number Street | Number Street | manufacture of the second of t | • |
| The state of the s | City State ZIP Co | ode | |
| City State ZIP | Code | • | |
| The same of the contract of th | enderen zur Auf est massen demokrasse seine State von der der der der der Aufte von der Aussen der | والمراقب والمعاولة والمراقبة والمعافرات والمعافرات والمراوات والمر | etiskamentasiat etiintää oli muutin muutin muutin muuteeti etiekäänen kastanista eteymisi toihan muutin muutin Saataan kastanista etiin kastanista muutin muutin muuteetiin kastanista kastanista eteymisi toi kastanista vas |
| e you been a party in any judici | al or administrative proceeding und | er any environmental law? Include se | ttlements and orders. |
| No | | | |
| Yes. Fill in the details. | | | D4.6 = #641 |
| | Court or agency | Nature of the case | Status of the |
| Case title | | | П |
| | Court Name | | Pending |
| | | | On appe |
| | | | Π. |
| | Number Street | | ☐ Conclud |
| 1: Give Details About You hin 4 years before you filed for i | City State : | or have any of the following connect er activity, either full-time or part-time | ions to any business? |
| hin 4 years before you filed for to A sole proprietor or self-emple A member of a limited liability A partner in a partnership An officer, director, or mana An owner of at least 5% of the No. None of the above applies. | city State : cur Business or Connections to bankruptcy, did you own a business ployed in a trade, profession, or oth ity company (LLC) or limited liability aging executive of a corporation the voting or equity securities of a corporation | Any Business or have any of the following connecter activity, either full-time or part-time partnership (LLP) orporation or business. Employer Iden | ions to any business? |
| 11. Give Details About You hin 4 years before you filed for it. A sole proprietor or self-emply A member of a limited liability A partner in a partnership An officer, director, or manally An owner of at least 5% of the No. None of the above applies. | city State : cur Business or Connections to bankruptcy, did you own a business ployed in a trade, profession, or oth ity company (LLC) or limited liability aging executive of a corporation he voting or equity securities of a co Go to Part 12. and fill in the details below for each Describe the nature of the bu | Any Business or have any of the following connecter activity, either full-time or part-time partnership (LLP) orporation or business. Employer Iden Do not include | ions to any business? |
| Give Details About You in 4 years before you filed for it A sole proprietor or self-emply A member of a limited liability A partner in a partnership An officer, director, or manally An owner of at least 5% of the No. None of the above applies. Yes. Check all that apply above | city State : cur Business or Connections to bankruptcy, did you own a business ployed in a trade, profession, or oth ity company (LLC) or limited liability aging executive of a corporation he voting or equity securities of a co Go to Part 12. and fill in the details below for each Describe the nature of the bu | Any Business or have any of the following connecter activity, either full-time or part-time partnership (LLP) orporation thusiness. Isiness Employer Iden Do not include | ions to any business? tification number Social Security number or iTiN. |
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| | Case number | f (if known) |
|--|---|---|
| | | |
| | | Employer Identification number |
| | Describe the nature of the business | Do not include Social Security number or ITIN |
| Business Name | - : | • |
| | | EIN: |
| Number Street | Name of accountant or bookkeeper | Dates business existed |
| | | and Samines Cristed |
| | - ! | |
| City State ZIP Code | _ | From To |
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| and the control of th | | : |
| hin 2 years before you filed for bankry | into did you siyo a firm in interest | and Charles and the Second Charles and American Second Sec |
| titutions, creditors, or other parties. | ptcy, did you give a financial statement to anyone al | oout your business? Include all financial |
| • | | |
| No | | |
| Yes. Fill in the details below. | | |
| | Date issued | |
| | | |
| | | |
| Name | - MM/DD/YYYY | |
| | | |
| Number Street | - | |
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| Give | | |
| Sign Below have read the answers on this Statemer | nt of Financial Affairs and any attachments, and I dec | clare under penalty of perjury that the |
| Sign Below ave read the answers on this Statemer swers are true and correct. I understar | nt of Financial Affairs and any attachments, and I dec nd that making a false statement, concealing propert | V. or obtaining money or property by frau |
| Sign Below ave read the answers on this Statemer swers are true and correct. I understar | nt of Financial Affairs and any attachments, and I dec nd that making a false statement, concealing propert n result in fines up to \$250,000, or imprisonment for | V. or obtaining money or property by frau |
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| ave read the answers on this Statemer swers are true and correct. I understar connection with a bankruptcy case cald. S.C. §§ 152, 1341, 1519, and 351. | nd that making a false statement, concealing propert in result in fines up to \$250,000, or imprisonment for | V. or obtaining money or property by frau |
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| save read the answers on this Statemer reswers are true and correct. I understar connection with a bankruptcy case can U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Deutor 1 Date HOOB d you attach additional pages to Your S | and that making a false statement, concealing properts in result in fines up to \$250,000, or imprisonment for Signature of Debtor 2 | y, or obtaining money or property by fraud up to 20 years, or both. |
| save read the answers on this Statemer swers are true and correct. I understar connection with a bankruptcy case can U.S.C. §§ 152, 1341, 1519, and 1571. Signature of Deltor 1 Date HOOB d you attach additional pages to Your Signature of Statement Stateme | and that making a false statement, concealing properts in result in fines up to \$250,000, or imprisonment for Signature of Debtor 2 Date | y, or obtaining money or property by fraud up to 20 years, or both. or Bankruptcy (Official Form 107)? |
| Sign Below ave read the answers on this Statemer swers are true and correct. I understar connection with a bankruptcy case can U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Deltor 1 Date HOOB d you attach additional pages to Your Signature of Deltor 1 | and that making a false statement, concealing properts in result in fines up to \$250,000, or imprisonment for Signature of Debtor 2 | y, or obtaining money or property by fraud up to 20 years, or both. or Bankruptcy (Official Form 107)? |
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| Fill in this in | formation to identify | your case: | |
|---------------------------------|---------------------------|----------------------------|------------------|
| Debtor 1 | Ayanna | NICOTE Middle Name | Lee Last Name |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States (| Sankruptcy Court for the: | Northern District of Illin | nois |
| Case number (if known) | | | |
| | | | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

| For any creditors that you listed in Part 1 of Schedule D: Credinformation below. | ditors Who Have Claims Secured by Property (Offici | al Form 106D), fill in the |
|---|---|---|
| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the propert as exempt on Schedule C |
| Creditor's name: | ☐ Surrendenthe property. | ☐ No |
| Description of property securing debt: | Retain the property and redeem it. Retain the property and enter into a Reatinnation Agreement. Retain the property and [explain]: | ☐ Yes |
| Creditor's name: | ☐ Surrender the property. | □ No |
| Description of property securing debt: | □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: | ☐Yes |
| Creditor's | ☐ Surrender the property. | □No |
| name: | ─ □ Retain the property and redeem it. | Yes |
| Description of property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | |
| | ☐ Retain the property and [explain]: | |
| Creditor's | ☐ Surrender the property. | Ū¹No |
| name: | Retain the property and redeem it. | Yes |
| Description of property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | |
| <u> </u> | Retain the property and [explain]: | |

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| Ayan | na | Nico | le | Lee |
|------------|-----------|------|-----------|-----|
| First Name | Middle Na | me | Last Name | |

| Case number (# | f known) | | |
|----------------|----------|--|--|

| any unexpired personal property lease that you listed in Schedule G: E. the information below. Do not list real estate leases. Unexpired leases id. You may assume an unexpired personal property lease if the truste | s are leases that are still in effect; the lease period has not yet |
|---|---|
| Describe your unexpired personal property leases | Will the lease be assumed? |
| essor's name: | □ No |
| escription of leased roperty: | ☐ Yes |
| essor's name: | □ No |
| escription of leased operty: | ☐ Yes |
| essor's name: | │ No |
| escription of leased operty: | Yes |
| essor's name: | No □ No □ Yes |
| escription of leased operty: | |
| ssor's name: | ☐ No |
| escription of leased operty: | ☐ Yes |
| ssor's name: | □ No |
| escription of leased operty: | Yes |
| ssor's name: | ☐ No |
| escription of leased operty: | ☐ Yes |
| | |
| Sign Below | |
| ler penalty of perjury, I declare that I have indicated my intention abou sonal property that is subject to an unexpired lease. | t any property of my estate that secures a debt and any |
| × | |
| | |